

## BUILDING PERMIT APPLICATION

Type of Building	Zoning District	Total Square Feet
Number of Families	Number of Stories	Parcel Number
I hereby certify that I have examined this application and its attachments finding them to be in accordance with the provisions set forth in the PA Uniform Construction Code, 2018 International Building Code, and Ordinances of West Brandywine Township.		
<b>APPROVED</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		
on _____, 20 _____		_____ Building Inspector
Permit Fee (base) \$ _____ + PA UCC Fee \$ _____		_____ Building Code Official
<b>Total Permit Fee</b> \$ _____		Permit Number _____

*Top Section for Office Use Only – Fill application below*

### **PROPERTY INFORMATION**

Street Number	Street Name
City	Zip Code
Parcel Number	Lot Size

### **OWNER INFORMATION**

First Name	Last Name or Business Name
Mailing Address (if different from above)	
Email Address	Daytime Phone

All Contractors engaging in home improvement services within West Brandywine Township shall comply with Contractor Insurance Verification Requirements: Ord. 2021-03, Adopted 8/5/2021.

### **AUTHORIZED AGENT/CONTRACTOR**

First Name	Last Name
Business Name	WBT Contractor License #
Mailing Address	
Email Address	Daytime Phone

## **TYPE OF IMPROVEMENT**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> New Residential        | <input type="checkbox"/> Residential Accessory Structure | <input type="checkbox"/> New Commercial        |
| <input type="checkbox"/> Residential Alteration |  | <input type="checkbox"/> Commercial Alteration |
| <input type="checkbox"/> Residential Addition   | <input type="checkbox"/> New Manufactured Home           | <input type="checkbox"/> Commercial Addition   |

## **NEW CONSTRUCTION INFORMATION**

	Number of
Stories	
Bedrooms	
Full Baths	
Partial Baths	
Garage (bays)	
Height above Grade	

	Area (sq ft)
Basement Area	
First Floor	
Second Floor	
Third Floor	
Garage Area	
Attic	
Deck	
Driveway	
Walkway/Patio	
Total Square Footage	

Type of Footings	Footing Size	Composition
Type of Piers	Size	Size of footings under piers

<b>Give size of:</b>	Clear Height	Wall Thickness	Material	Joists	Center Studs	Centers
Basement						
1 <sup>st</sup> Floor						
2 <sup>nd</sup> Floor						
3 <sup>rd</sup> Floor						
Upper Floors						
R-Values	Walls	Ceiling	Basement			
Roofing	Rafters	Sheathing	Shingles	Slope		

Heating System:    ☐ Hot Air                      ☐ Hot Water                      ☐ Steam                      ☐ Radiant

Method of firing/fuel system:    ☐ Coal                      ☐ Oil                      ☐ Gas                      ☐ Electric                      ☐ Other\_\_\_\_\_

Water:                      ☐ Public                      ☐ On Lot Private – Well CCHD Permit # \_\_\_\_\_ ☐ Private Community

Sewer:                      ☐ Public                      ☐ On Lot- Septic CCHD Permit # \_\_\_\_\_ ☐ Private Community

Will building/structure be wired for electricity?

☐ NO                      ☐ YES                      Name of Electrical Inspection Agency \_\_\_\_\_

Are any buildings/structures to be demolished?

☐ YES                      ☐ NO

If yes, Demolition permit application is required.

## **GENERAL CONSTRUCTION INFORMATION**

FLOOR AREA		LOT COVERAGE	
<u>Existing (sq ft)</u>	<u>Proposed NEW (sq ft)</u>	<u>Existing (sq ft)</u>	<u>Proposed NEW (sq ft)</u>
1 <sup>st</sup> Floor	1 <sup>st</sup> Floor	Dwelling	Dwelling
2 <sup>nd</sup> Floor	2 <sup>nd</sup> Floor	Driveway	Driveway
3 <sup>rd</sup> Floor	3 <sup>rd</sup> Floor	Walkway	Walkway
Upper Floor	Upper Floor	Shed(s)	Shed(s)
Basement	Basement	Accessory Structure(s)	Accessory Structure(s)
<input type="checkbox"/> Finished <input type="checkbox"/> Unfinished	<input type="checkbox"/> Finished <input type="checkbox"/> Unfinished	Patio	Patio
Garage	Garage		
<input type="checkbox"/> Attached <input type="checkbox"/> Detached	<input type="checkbox"/> Attached <input type="checkbox"/> Detached	Lot Size (sq ft)	
Deck	Deck	Total Existing Coverage Area (sq ft):	
Total NEW Floor Area (sq ft):		Total Proposed NEW Coverage (sq ft):	

### **Pursuant to Township Code Chapter 161: Stormwater Management**

Impervious coverages totaling greater than 2000 ft<sup>2</sup> will require engineered stormwater agreement and grading review.

Impervious coverages totaling greater than 1000 ft<sup>2</sup> will require simplified stormwater agreement.

## **DESCRIBE PROPOSED WORK:**

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When will work commence? \_\_\_\_\_

**TOTAL COST OF CONSTRUCTION** (include materials and labor) \$ \_\_\_\_\_

## **APPLICANT'S CERTIFICATION**

Application is hereby made to West Brandywine Township for the approval of the Specifications and Plans herewith submitted for erection of the building/structure herein described.

The Applicant certifies that:

1. Within sixty days after completion of the work, any temporary structure or workshop will be removed, and further agrees to the requirements that all provisions of the 2018 International Building Code and Township Zoning Ordinances shall be complied with during the construction of said building/structure, whether specified herein or not.
2. The estimate cost and other information provided as part of this application is correct
3. Any changes to the approved documents will be filed with the Township
4. Approved plans and specifications will be available on site at all times
5. Work shall not commence prior to the issuance of a building permit
6. Approved permits shall be prominently displayed at the construction site

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## INSPECTIONS

The issuance of this building permit requires the applicant to comply with all provisions set forth in the PA Uniform Construction Code, 2018 International Code Council Building Code, and ordinances of West Brandywine Township. The inspections marked below are the stages of construction when West Brandywine Township Codes Department must be notified by the applicant. Inspections shall be scheduled forty-eight (48) hours in advance. Failure to notify the Township before proceeding to the next step will result in a stop order. Twenty-four (24) hour notice is required to cancel a scheduled inspection; Failure to do so will result in a failed inspection. *\*Fee for all failed inspections as outlined in the current fee schedule.*

*This section to be completed by WBT Codes Department*

### **REQUIRED INSPECTIONS**

Permit # \_\_\_\_\_

- ☐ **SETBACK INSPECTION**  
Inspection shall be made checking the location of construction prior to excavation. Stakes or batter boards must be in place and property lines clearly marked.
- ☐ **FOOTING INSPECTION**  
Inspection shall be made after excavation, any formwork is completed, and grade stakes are installed. Concrete may not be placed until the footings are approved by the Building Inspector.
- ☐ **FOUNDATION INSPECTION**  
Foundation walls must be parged and dampproofed, and foundation drainage installed. No framing or backfilling until approved by the Building Inspector.
- ☐ **ROUGH ELECTRIC**  
Applicant is responsible for contracting with a third-party agency licensed in Pennsylvania for electrical inspections. Rough and Final electrical inspections must be completed by the same electrical inspector.
- ☐ **ROUGH FRAMING AND ROUGH PLUMBING INSPECTION**  
After all rough framing, rough plumbing, rough heating, and rough wiring is complete. The rough wiring must be inspected by an approved independent inspection agency and the approval posted at the site. Do not install insulation until the rough framing and rough plumbing are approved by the Building Inspector.
- ☐ **POST INSULATION/ PRE- DRYWALL**
- ☐ **DRYWALL** (prior to tape and spackle)
- ☐ **FINAL ELECTRIC**  
Applicant is responsible for contracting with a third-party agency licensed in Pennsylvania for electrical inspections. Rough and Final electrical inspections must be completed by the same electrical inspector.
- ☐ **FINAL USE & OCCUPANCY**  
A final Use & Occupancy inspection will be made after the structure has been completed. The following items must be presented prior to the issuance of a Use & Occupancy Permit:

\_\_\_\_\_  
West Brandywine Township Codes

\_\_\_\_\_  
Date

A dwelling may not be occupied, or a structure may not be used, until the issuance of a Certificate of Use & Occupancy. If the required inspections are not performed as noted above, failed inspection fees may apply and/or a Certificate of Use & Occupancy may be denied.

I HEREBY ACKNOWLEDGE RECEIPT OF THIS FORM

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

## **CONTRACTOR INFORMATION**

All Contractors engaging in home improvement services within West Brandywine Township shall comply with Contractor Insurance Verification Requirements; Ord. 2021-03, Adopted 8/5/2021.

GENERAL CONTRACTOR WBT Contractor License # _____	Name Email	Address Phone
EXCAVATION/GRADING WBT Contractor License # _____	Name Email	Address Phone
MASONRY-CONCRETE WBT Contractor License # _____	Name Email	Address Phone
MASONRY-BRICK/STONE WBT Contractor License # _____	Name Email	Address Phone
CARPENTER WBT Contractor License # _____	Name Email	Address Phone
ROOFING WBT Contractor License # _____	Name Email	Address Phone
PLUMBING WBT Contractor License # _____	Name Email	Address Phone
ELECTRICAL WBT Contractor License # _____	Name Email	Address Phone
HVAC WBT Contractor License # _____	Name Email	Address Phone
INSULATION WBT Contractor License # _____	Name Email	Address Phone
DRYWALL WBT Contractor License # _____	Name Email	Address Phone
PAINTER WBT Contractor License # _____	Name Email	Address Phone
KITCHEN/TRIM INSTALLER WBT Contractor License # _____	Name Email	Address Phone
FLOORING WBT Contractor License # _____	Name Email	Address Phone

PLEASE NOTE: General contractor registration covers only those employed by the general contractor. Persons representing themselves, as contractors, shall be registered even though they are working under the general contractor.

I, \_\_\_\_\_, being the applicant for the building permit do hereby affirm the enclosed information as being true and correct. Should any of the listed contractors change, it will be my responsibility to inform the Township Code Enforcement Officer and see that the Township registration requirements are met.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

**West Brandywine Township Procedure and Required Documentation for Permit Applications**

- Original, signed permit applications are accepted; electronic versions may be sent to [permit@wbrandywine.org](mailto:permit@wbrandywine.org)
- Residential permit applications shall include one (1) set of all supporting information consisting of site plan, structural/building plans and specifications, and, if necessary, manufacturer's installation instructions; an additional electronic copy may be sent to [permit@wbrandywine.org](mailto:permit@wbrandywine.org)
- Commercial permit applications shall include one (1) hardcopy and one (1) electronic copy of all supporting documents including site plan, and structural/building plans and specifications; shall be prepared and signed by a registered Engineer/Architect. Additional copies may be required at the discretion of the Plans Reviewer and/or Building Code Official. Electronic copies shall be sent to [permit@wbrandywine.org](mailto:permit@wbrandywine.org)
- All applications shall provide a site plan showing the size and location of new construction and existing structures on the site and distances from lot lines. For demolition permit applications, the site plan shall show construction to be demolished, the location and size of existing structures, and construction that are to remain on the site or plot.
- All Contractors engaging in home improvement services within West Brandywine Township shall comply with Contractor Insurance Verification Requirements: Ord. 2021-03, Adopted 8/5/2021.
- Permit applications, once deemed complete, are allotted a review period of 15-business days for Residential applications; 30-business days for Commercial applications; 45-Calendar days for Grading applications.
- Grading Permit Fee of \$350.00 covers one (1) hour Engineer review time, one (1) site visit by Code Officer and Administrative costs. In the event of additional reviews, applicant is required to establish an escrow with the Township in an initial amount of \$500.00 and maintain a minimum balance requirement of \$250.00 each month thereafter, until the issuance of a Use and Occupancy permit is granted. Applicant shall submit W-9 to establish escrow.
- Approved permit applications shall be issued once permit fees are satisfied according to the current Fee Schedule as adopted by the Township Board of Supervisors

# COUNTY OF CHESTER ASSESSMENT OFFICE

313 W. MARKET STREET, SUITE 4202, P.O. BOX 2748, WEST CHESTER, PA 19380

**JONATHAN B. SCHUCK, MBA CPE**  
*Director of Assessment*

610-344-6105  
Fax 610-344-5902  
[www.chesco.org](http://www.chesco.org)

Dear Property Owner:

As you have applied for a building permit from your municipality, the county Assessment Office would like to advise you of the steps surrounding our involvement in the process. We would like to make sure that you are aware of what will take place during construction and after the improvement is finished.

- 1) The municipality is required to supply a list of all building and zoning permits to the Assessment Office monthly.
- 2) An assessor will visit your property when they are in your municipality (generally rotate through every 2 - 3 months).
- 3) When arriving at your property, the assessor will come to the front door and identify themselves wearing a Chester County I. D. badge and will present a business card. They will ask you questions about the building permit and may need to measure the improvements (from the outside).
- 4) If you are not home when the assessor arrives, a business card will be left with a note on the flip side of the card. The assessor will proceed to the improvement and measure if the work is sufficiently complete. Otherwise, they will mark it for a revisit the next time they are in the municipality.
- 5) Please cooperate with the assessor, as he or she is simply trying to get the correct information about your improvement, so there will be no mistakes on the county record.
- 6) After the construction is finished or 30 months has elapsed your improvement will be assessed and added to your property record card.
- 7) You will receive a notice from our office changing your assessment reflecting the addition of the new improvement. If you require more information, please call our office at 610-344-6105 and ask to speak to the assessor assigned to your municipality.

It is the intention of this letter to inform you of the assessment process so that you realize that we will be visiting your property. Please note that due to time constraints we generally do not make appointments, unless absolutely necessary. Please be patient when an assessor knocks on your door and answer any questions to the best of your ability. Thank you for your anticipated cooperation.

Sincerely,

Jonathan B. Schuck  
Director

WEST BRANDYWINE TOWNSHIP CODE ENFORCEMENT OFFICE

198 Lafayette Road

West Brandywine, PA 19320

Phone: 610-380-8200 Fax: 610-384-4934

**CONTRACTOR'S INSURANCE VERIFICATION**

**FEE PER CURRENT FEE SCHEDULE**

DATE: \_\_\_\_\_

Contractor's engaging in any and all types of home improvements shall register with West Brandywine Township Codes Office prior to commencing home improvements within the Township. A check shall accompany completed application, made payable to West Brandywine Township.

Please complete the application in its entirety. Sign and date application, include current Certificate of Insurance naming West Brandywine Township as the Certificate Holder, specifying minimum general liability and workers compensation limits as outlined below. If you are filing a self-employment or religious exemption, and are not required to carry Workers Compensation Insurance, **please complete and have notarized the attached Affidavit for submittal along with the Application. If the Affidavit is not completed, processing of the application will be delayed. Also include a copy of your State Registration Certificate.**

The following minimum insurances are required to obtain a valid Registration Certificate:

- a. General Liability - 1) Per Occurrence - \$500,000; 2) Per Personal Injury - \$500,000; 3) Property Damage - \$1,000,000
- b. Workers Compensation and Employer's Liability - 1) Each Accident - \$100,000

***VALID FOR ONE YEAR FROM DATE OF ISSUANCE***

**CONTRACTOR INFORMATION:**

Contractor's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Names of principal partner or officer: \_\_\_\_\_

Type of Contractor: \_\_\_\_\_

Number of Employees: \_\_\_\_\_ If you have no employees and you do not have worker's compensation insurance, please complete attached Affidavit, sign, notarize, and include with this application.

Municipalities presently certified in: \_\_\_\_\_

Certificate of Insurance attached: ☐ Yes ☐ No

**CERTIFICATION: THE ABOVE STATEMENTS ARE TRUE AND CORRECT.**

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

WEST BRANDYWINE TOWNSHIP CODE ENFORCEMENT OFFICE

198 Lafayette Road

West Brandywine, PA 19320

Phone: 610-380-8200 Fax: 610-384-4934

Worker's Compensation Insurance Coverage to comply with Act 44 of 1993

## AFFIDAVIT

**To be completed if Applicant is a contractor claiming exemption from providing Worker's Compensation Insurance, i.e. if you have no employees or claiming exemption on religious grounds, the Affidavit must be completed, signed and notarized. Contractor's Insurance Verification process will be delayed if Affidavit is not completed.**

Name of Applicant: \_\_\_\_\_

Federal or State Employer or Tax Identification No: \_\_\_\_\_

The undersigned swears or affirms that he/she is not required to provide Worker's Compensation Insurance under the provisions of Pennsylvania's Worker's Compensation Law for one of the following reasons as indicated:

☐

Contractor and sole proprietor without employees-Contractor prohibited by Law from employing any individual to perform work pursuant to this Building Permit unless Contractor provides proof of insurance to the Township.

☐

Contractor exempt on religious grounds qualified under Section 304.2 of the WC Act.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_

***Subscribed and sworn to before me this*** \_\_\_\_\_ ***day of*** \_\_\_\_\_

\_\_\_\_\_  
***Signature of Notary Public***

\_\_\_\_\_  
***My Commission Expires:***