



Township of Lower Milford

Lehigh County, Pennsylvania

7607 Chestnut Hill Church Road Coopersburg, PA 18036
Phone 610-967-4949 Fax 610-967-1013 www.lowermilford.org

UNIFORM CONSTRUCTION PERMIT APPLICATION

All Construction Applications must be accompanied by a deposit in accordance with the current fee schedule. Checks must be made payable to:

Cowan Associates, Inc. 120 Penn Am Drive, Quakertown, PA 18951, 215-536-7075

Project/Property Address: _____ Tax Map or Pin # _____

Owner Name: _____

Address: _____ City: _____ Zip Code: _____

Phone No.: _____ Email Address: _____

Applicant/Contractor Name: _____

Address: _____ City: _____ Zip Code: _____

Phone No.: _____ Email Address: _____

BUILDING PERMIT TYPE (Check all that apply)

- | | | | |
|---|--|--|---|
| <input type="radio"/> New Construction | <input type="radio"/> Above Ground Pool | <input type="radio"/> Addition | <input type="radio"/> Roofing/Reroofing |
| <input type="radio"/> Interior Alteration | <input type="radio"/> In-Ground Pool | <input type="radio"/> Exterior Deck | |
| <input type="radio"/> Mobile Home | <input type="radio"/> Exterior Alteration | <input type="radio"/> Modular/Manufactured Housing | |
| <input type="radio"/> Demolition | <input type="radio"/> Roof over Patio/Deck | <input type="radio"/> Wood/Pellet Stove | <input type="radio"/> Geothermal System |
| <input type="radio"/> PV Solar Panels | <input type="radio"/> Residential Accessory Structure (1,000 sq. ft. or greater) | <input type="radio"/> Electrical | <input type="radio"/> Other: _____ |
| <input type="radio"/> Plumbing | <input type="radio"/> Mechanical | | |

PROPOSED USE

- Single Family Dwelling Two-Family Dwelling Multi-Family (Three or More Units) Commercial

Description of Proposed Work: _____

STRUCTURAL DIMENSIONS/CHARACTERISTICS

Exterior Width _____ Ft. Exterior Length _____ Ft. Total Exterior Area _____ Sq. Ft.

Building Height: _____ Ft. Number of Stories: _____

Gross Sq. Ft. Basement: _____ Gross Sq. Ft. First Floor: _____

Gross Sq. Ft. Second Floor: _____ Gross Sq. Ft. Garage (attached): _____

Other Area: _____ Total Gross Area Including Basement and Garage: _____ Sq. Ft.

Finished Basement: Y N Municipal Water Supply: Y N Municipal Sewer: Y N

Number of Bedrooms Existing: _____ Number of Bedrooms Proposed: _____

Sewage Permit Number: _____ (Provide copy of sewer permit with application)

Estimated Cost of Construction (Reasonable fair market value) \$ _____

ZONING INFORMATION

Zoning District: _____

Total Proposed Impervious Coverage _____ % of Lot

Lot Size: _____ Acre

Total Proposed Building Coverage _____ % of Lot

Proposed Area of Grading/Disturbance _____ Sq. Ft.

OTHER PERMITS REQUIRED

- Township Driveway Permit Township E&S Permit Township Storm-Water Permit
 PADOT HOP County E&S Review/Permit NPDES Permit

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and the PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by Lower Milford Township. The property owner and applicant assume the responsibility of locating all property lines, setback lines, easements, rights-of-way, sewer systems, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of Lower Milford Township or other regulatory agency. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be signed by the record owner of the property.

I certify the building code official or the building code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the codes and ordinances applicable to such permit.

Signature of Owner

Print Name of Owner

Date

FOR OFFICE USE ONLY

Application No.: _____ Permit No.: _____ Zoning Appeal Case No.: _____
Total Fees: _____ Receipt No. _____ Check No.: _____
Application Received: _____ By: _____ Permit Issued By: _____ Date: _____