



LOWER NAZARETH TOWNSHIP

PLANNING & ZONING OFFICE

623 MUNICIPAL DRIVE, SUITE 200
NAZARETH, PA 18064
TELEPHONE: 610-759-7434
FAX: 610-746-3317

Hot Tub/Spa Submission Checklist

- 1 cc of Permit Application, signed the Property Owner and Applicant, if not the Property Owner
- 2 cc of plot plan of location of hot tub on property, showing dimensions to property lines, septic system, and house
- 2 cc of Electrical information
- 2 cc of Cover specifications
- 1 cc of signed Barrier System Acknowledgement Form (orange paper)
- 1 cc of current Insurance Certificate for contractor installing the hot tub, **showing proof of Worker's Compensation insurance**
- 1 check for \$254.00 for Building Permit, payable to "Lower Nazareth Township"
- 1 check for \$50.00 for Zoning Permit, payable to "Lower Nazareth Township"

Please Note!

Once a complete application has been received, the Township has, by law, up to 15 business days to approve/deny your application. Please account for this timeframe when planning your project. If your permit is approved in advance of the 15th day or additional information is required to process the permit, we will contact you accordingly.



LOWER NAZARETH TOWNSHIP

623 Municipal Drive, Suite 200
Nazareth, PA 18064
Ph. 610-759-7434/Fax 610-746-3317

TOWNSHIP USE ONLY
Permit #
Approve/Deny By
Received Stamp

POOL/HOT TUB PERMIT APPLICATION

LOCATION OF PROPOSED WORK OR IMPROVEMENT

Address Tax Map Id# (If Known)

RESPONSIBLE PARTIES

Is This Application Being Made By The Property Owner? Yes No -> If Not, Then By Whom? Tenant Contractor Other

Applicant Email Address:

Address

Phone #: Alternate Phone #: Fax #:

Property Owner: Email Address:

Same as Applicant

Address:

Phone #: Alternate Phone #: Fax #:

Contractor: Email Address:

Not Applicable Property Owner

Address:

Phone #: Alternate Phone #: Fax #:

Worker's Compensation Certificate Required Attached Yes No (Permit will not be released without proof of Worker's Compensation Insurance)

Architect or Engineer: Email Address:

Not Applicable

Address:

Phone #: Alternate Phone #: Fax #:

Complete Items A Thru E as they apply to this permit and the property in question:

A. BUILDING PERMIT is requested for:

- Above Ground Pool In-Ground Pool w/fence
Hot Tub Accessory Building +500 s.f.
Other

B. ZONING/GRADING PERMIT is requested for:

- In-Ground Pool Above Ground Pool Fence
Pool Deck Accessory Building
Other

C. PROPOSED IMPROVEMENTS:

Pools: Above Ground Pool Diameter (Ft) Depth Of Pool (Ft)
In Ground Length (Ft) X Width (Ft) = Total Area of Pool Depth Of Pool (Ft)
Type of Construction: Concrete Liner Fiberglass Metal Other

Barrier Protection: Fence Height: Number of Gates: Door Alarm System Yes No

Patios, Decks, & Walkways: Not Applicable Height above Grade Material
Length x Width Total Sq. Ft.

Accessory Structures: Not Applicable


Structure Length (Ft) X Width (Ft) = TOTAL AREA OF THE STRUCTURE s.f.

Height: Structure Height (Ft) Number Of Stories

D. PROPOSED SETBACKS & LOT COVERAGE:

New Impervious Coverage _____ s.f. Existing Building/Impervious Coverage _____ s.f. Total Impervious Coverage _____ s.f.
 Pool Setback from Property Line: Rear Yard (Ft) _____ Left Side Yard (Ft) _____ Right Yard _____ (Ft)
 From Septic (Ft) _____ From Rear of Dwelling (Ft) _____
 Fence Setback from Property Line: Rear Yard (Ft) _____ Left Side Yard (Ft) _____ Right Yard _____ (Ft)

E. ESTIMATED COST OF CONSTRUCTION \$ _____ (To The Nearest Dollar)

| |
|--|
| SITE OR PLOT PLAN (For Applicant Use) <input type="checkbox"/> Check here if separate document(s) attached |
|  |

The Applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents, PA Act 45 (Uniform Construction Code) and any additional building code requirements adopted by Lower Nazareth Township. The property owner and Applicant assume the responsibility of located all property lines, setback lines, easements, rights-of-way, 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 Nazareth Township or any other governing body. The Applicant certifies he/she understands all the applicable codes, ordinances, and regulations. The application, together with plans and attachments, are made part of this application by the undersigned. The Applicant and owner also agree they are responsible for the replacement of any township road to township standards, which are damaged during the building of the permitted structure or improvement.

Per Sections 403.43(a) and 403.63(a) of Act 45, the Applicant agrees to extend the required action period for 5 business days for any Building Permits that require Zoning/Grading Permit issuance.

Per Section 403.43(m) and 403.63(k) of Act 45, the Applicant shall submit all required fees of the permit, or the permit will be deemed invalid and the application denied.

By signing this application, authorization is granted to any municipal representative of Lower Nazareth Township to access the above property as stated within this application at any reasonable hour; to inspect and verify that any proposed use and/or structure contained within this application and/or that exists on the above property complies with all Lower Nazareth Township ordinances; and states that the information provided on this application by the Applicant(s) and owner(s) is true and correct to the best of their knowledge or belief. The Applicant hereby acknowledges that Lower Nazareth Township and their assigns are the sole producer of construction inspection services for Lower Nazareth Township.

The Applicant also understands that occupancy of the structure will not take place until both building construction and grading construction are completed as per the permit application and approved plan.

SIGNATURE OF APPLICANT(S) _____ DATE _____

SIGNATURE OF PROPERTY OWNER(S) _____ DATE _____

DO NOT WRITE BELOW THIS LINE

OFFICE USE ONLY

DATE APPLICATION RECEIVED _____

ISSUED BY: _____ ZONING ADMINISTRATOR and/or BUILDING CODE OFFICIAL

| PERMIT FEES | | |
|-----------------------------------|----|--|
| Bldg Permit Fee | \$ | <input type="checkbox"/> Cash <input type="checkbox"/> Check _____ Receipt # _____ |
| Twp Admin & Education Fee | \$ | |
| TOTAL BUILDING PERMIT FEES | \$ | |
| Zoning/Grading Permit Fee | \$ | <input type="checkbox"/> Cash <input type="checkbox"/> Check _____ Receipt # _____ |

FEE CALCULATION: _____
