



**LOWER NAZARETH TOWNSHIP**

623 Municipal Drive, Suite 200  
Nazareth, PA 18064  
Ph. 610-759-7434/Fax 610-746-3317  
[www.lowernazareth.com](http://www.lowernazareth.com)

**BUILDING, ZONING & GRADING  
PERMIT APPLICATION**

<b>TOWNSHIP USE ONLY</b>	
Permit # _____	
Approve/Deny By _____	
Received Stamp	

**LOCATION OF PROPOSED WORK OR IMPROVEMENT**

Address \_\_\_\_\_  
Subdivision/Development Name & Lot# (If Known) \_\_\_\_\_ 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:** \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_ Alternate Phone #: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Email Address: \_\_\_\_\_

**PROPERTY OWNER:** \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_  
 Same as Applicant  
Address: \_\_\_\_\_ Alternate Phone #: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_  
Point of Contact: \_\_\_\_\_ Email Address: \_\_\_\_\_

**CONTRACTOR:** \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_  
 Not Applicable  Property Owner  
Address: \_\_\_\_\_ Alternate Phone #: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_  
Point of Contact: \_\_\_\_\_ Email Address: \_\_\_\_\_

**ARCHITECT/ENGINEER:** \_\_\_\_\_ Phone #: (\_\_\_\_) \_\_\_\_\_  
 Not Applicable  
Address: \_\_\_\_\_ Alternate Phone #: (\_\_\_\_) \_\_\_\_\_  
\_\_\_\_\_ Fax #: (\_\_\_\_) \_\_\_\_\_  
Individual Responsible for Project: \_\_\_\_\_ Email Address: \_\_\_\_\_

**PLEASE CHOOSE PERMIT TYPE (One or Multiple):**

- A. BUILDING PERMIT will be for:**  Not Applicable
- New Structure/Building  Foundation only
  - Addition to Building/Structure  Temporary Structure
  - Accessory Structure +500 s.f.  Deck + 30" off grade
  - Exterior Alterations  Interior Alterations
  - Alarm or Fire Suppression System
  - Electrical, Plumbing and/or HVAC improvements
  - Demolition  Moving (relocation)
  - Emergency Repair  Other \_\_\_\_\_

- B. ZONING PERMIT will be for:**  Not Applicable
- New Use  Change of Use
  - Shed/Accessory Structure less than 500 s.f.
  - Accessory Structure +500 s.f.
  - Fence  Deck, less than 30" off grade
  - Exterior Alterations, i.e. patios, retaining walls, etc.
  - Razing/Demolition  Temporary Structure
  - Other \_\_\_\_\_

- C.  GRADING PERMIT  Not Applicable**

**DESCRIPTION OF PROPOSED WORK/PURPOSE OF APPLICATION:** \_\_\_\_\_  
\_\_\_\_\_

(COMPLETE THIS PAGE AS APPLICABLE)

D. NEW STRUCTURES/USES:

1. **New Accessory Structure/Shed**  Not Applicable

Are there any other accessory structures/sheds on the property?  No  Yes If yes, how many? \_\_\_\_\_ Total Area \_\_\_\_\_

New Structure Length (Ft) \_\_\_\_\_ X Width (Ft) \_\_\_\_\_ = TOTAL AREA OF THE NEW STRUCTURE \_\_\_\_\_ (Sq. Ft.)

Height: Structure Height \_\_\_\_\_ (Ft) Number of Stories \_\_\_\_\_

2. **Fence**  Not Applicable

Fence Height: \_\_\_\_\_ Number of Gates: \_\_\_\_\_ Type/Style: \_\_\_\_\_

3. **Principal Structures – New/Alterations**  Not Applicable

New Structure/Building  Addition to Building/Structure

AREA OF NEW or RENOVATED FLOOR SPACE \_\_\_\_\_ (Sq. Ft.) TOTAL AREA OF ALL FLOOR SPACE \_\_\_\_\_ (Sq. Ft.)

1st Floor Space \_\_\_\_\_ (Sq. Ft.) 2nd Floor Space \_\_\_\_\_ (Sq. Ft.)

Garage Floor Space \_\_\_\_\_ (Sq. Ft.) Other Floor Space \_\_\_\_\_ (Sq. Ft.)

Height: Structure Height \_\_\_\_\_ (Ft) Number of Stories \_\_\_\_\_

Residential Buildings Only: No of Bedrooms \_\_\_\_\_ No of Bathrooms \_\_\_\_\_ No of Garage Doors \_\_\_\_\_

4. **Structure Utilities**  Not Applicable

Heat Source:  Oil  Gas  Electricity  Geothermal  Solar  Other  None

Source of Water Supply:  Public  On-Lot Well  Other  None

Sewage Disposal:  On-Lot  Public  Private System  None

E. LOT DIMENSIONS, PROPOSED SETBACKS and IMPERVIOUS COVER:

**Impervious Cover:**

New Impervious Coverage \_\_\_\_\_ s.f.  N/A

Existing Building/Impervious Coverage \_\_\_\_\_ s.f.

Total Impervious Coverage \_\_\_\_\_ s.f.

**Setback - Property Line to Use**

Front Yard (Ft) \_\_\_\_\_

Rear Yard (Ft) \_\_\_\_\_

Left Side Yard (Ft) \_\_\_\_\_

Right Side Yard (Ft) \_\_\_\_\_

**Lot Dimensions**

Width (Ft) \_\_\_\_\_

Length (Ft) x \_\_\_\_\_

Total Lot Area \_\_\_\_\_ (Sq. Ft.)

or Acre(s) \_\_\_\_\_

F. ELECTRIC, PLUMBING, HVAC IMPROVEMENTS

Not Applicable

New/Upgrade Electrical Svc  Electrical Improvements/Modifications  New Plumbing Fixtures  Additional HVAC Units

New Service Size \_\_\_\_\_ Utility Co. Job # \_\_\_\_\_

**Non Residential**  Not Applicable

No. of New Outlets \_\_\_\_\_ No. of Services & Feeders \_\_\_\_\_ Amps per service and feeders \_\_\_\_\_

No. of heating & A/C. units, motors, transformers, and generators \_\_\_\_\_ hp or kw of kva per unit \_\_\_\_\_

No. of transformers, vaults, substations, etc. \_\_\_\_\_ (x3) Multiplier for voltages over 480 volts

G. GRADING TYPE  Not Applicable

New Home  Inground Pool  New Land Development

Total Acres to be Graded \_\_\_\_\_ Average Slope \_\_\_\_\_ %

H. FLOODPLAIN  Not Applicable

Is the site location within an identified flood hazard area?  No  Yes (If yes, the Floodplain Development Application must also be completed)

I. ESTIMATED COST OF CONSTRUCTION \$ \_\_\_\_\_ (To the Nearest Dollar)

**By signing below, the Applicant and Owner certify and acknowledge the following:**

1. The information provided on this application is true and correct to the best of their knowledge or belief. The application, together with plans and attachments, are made part of this application by the undersigned.
2. He/She understands all the applicable codes, ordinances, and regulations.
3. He/She assumes responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc.
4. He/She is responsible for the replacement of any Township Road to Township standards, which are damaged during the building of the permitted structure or improvement.
5. The work will be completed in accordance with the "approved" construction documents, pursuant to PA Act 45 (Uniform Construction Code) and any additional building code requirements adopted by Lower Nazareth Township.
6. All required fees of the permit shall be submitted upon application, or the permit will be deemed invalid and the application denied (Section 403.43(m) and 403.63(k) of PA Act 45).
7. Pursuant to PA Act 45, Chapter 5, Section 502 (a), a Building Permit will be issued upon receipt of all other required permits or approvals related to the construction.
8. 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.
9. 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.
10. Lower Nazareth Township and their assigns are the sole producer of construction inspection services for Lower Nazareth Township.
11. Building Permits: A Certificate of Occupancy will be issued within 5 business days after receipt of final inspection report indicating compliance. Occupancy of the building cannot take place until both building construction and site construction are completed as per the approved permit and approved site plan.
12. In regard to Grading: A Certificate of Occupancy will not be issued after April 15<sup>th</sup> or before September 30<sup>th</sup> without final lot grading approval by the Township Engineer. A Temporary Certificate of Occupancy may be issued on or after the September 30<sup>th</sup> or on or before April 15<sup>th</sup> if recommended by the Township Engineer.

SIGNATURE OF APPLICANT(S) \_\_\_\_\_ DATE \_\_\_\_\_

SIGNATURE OF PROPERTY OWNER(S) \_\_\_\_\_ DATE \_\_\_\_\_

Payment must be submitted in CASH or CHECK, payable to: "Lower Nazareth Township".

**DO NOT WRITE BELOW**

**OFFICE USE ONLY**

DATE APPLICATION RECEIVED \_\_\_\_\_

PERMIT FEES			ESCROWS			
Building Permit Fee or Deposit	\$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____ Receipt # _____	Grading	\$ _____		
Twp Admin & Education Fee	\$ _____		Septic	\$ _____		
Amount Paid <input type="checkbox"/> Deposit Paid	\$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____ Receipt # _____	<b>TOTAL FEES</b>	<b>\$ _____</b>		
BALANCE DUE	\$ _____		Paid By:	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____	Receipt # _____	
<b>TOTAL BUILDING PERMIT FEE</b>	<b>\$ _____</b>		IMPACT FEES			
Septic Admin Fee	\$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____ Receipt # _____	<b>OPEN SPACE FEE</b>	<b>\$ _____</b>		
Grading Permit Fee	\$ _____		Paid By:	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____		
Driveway Permit Fee	\$ _____		<b>TRAFFIC IMPACT</b>	<b>\$ _____</b>		
Zoning Permit Fee	\$ _____		Paid By:	<input type="checkbox"/> Cash <input type="checkbox"/> Check _____		
<b>TOTAL ZONING PERMIT FEES DUE</b>	<b>\$ _____</b>					

**SITE OR PLOT PLAN** *(For Applicant Use)*

*Check here if separate document(s) attached*



Please use this space to sketch your proposed improvement. You may attach separate drawing(s) as necessary.

At a minimum, sketches must include:

1. Draw and label the proposed improvement, existing structure(s), septic system, etc. as they are located on the property;
2. Dimensions from the property line to the proposed improvement;
3. Dimensions of the proposed improvement, i.e. 10' x 12' shed;
4. Any known easements that exist on the property.



# LOWER NAZARETH TOWNSHIP

## PLANNING & ZONING OFFICE

623 MUNICIPAL DRIVE, SUITE 200

NAZARETH, PA 18064

TELEPHONE: 610-759-7434

FAX: 610-746-3317

## PENNSYLVANIA WORKERS COMPENSATION INSURANCE COVERAGE INFORMATION AFFIDAVIT

***PLEASE READ DIRECTIONS CAREFULLY BEFORE FILLING OUT THIS FORM.***

A Building or Zoning Permit will not be issued by Lower Nazareth Township until this form is completed properly.

Please complete all sections. All blank spaces must be completed with the requested information and boxes must be checked as they pertain to Contractor status with the Pennsylvania Workman's Compensation Insurance Law.

If you are SELF-EMPLOYED or claiming a religious exemption, this form must be signed in front of a NOTARY PUBLIC.

**NOTE: This form will only be maintained in the Lower Nazareth Township records for one (1) YEAR after the Building/Zoning Permit is issued. It is the responsibility of the contractor to renew this permit yearly. If the contractor wishes to provide a certificate of insurance, the contractor must notify their insurance company that Lower Nazareth Township is to be named as the policy certificate holder on the certificate.**



# CONTRACTOR WORKER'S COMPENSATION AFFIDAVIT

**Property Owner performing own work.** I own this property and will perform all work myself. If I do hire contractors or employees to perform any work under the building permit issued in connection herewith, I, or my contractor will provide proof of worker's compensation insurance immediately. **(NO Notary Required)**

**Contractor will perform work.**

Name of Contractor \_\_\_\_\_

Title of Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone# (\_\_\_\_) \_\_\_\_\_ Fax # (\_\_\_\_) \_\_\_\_\_ Federal ID Number: \_\_\_\_\_

**Choose only one of the following:**

**Contractor Certificate of Insurance.** Attached hereto is my Certificate of Insurance or self-insurance evidence compliant with Pennsylvania's Worker's Compensation Law, which insurance or self-insurance remains in full force and effect. **(NO Notary Required)**

N  
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D

**Contractor is self-employed and has no employees.** As contractor, I will perform all work required in connection with this permit myself. I have no employees and will use no subcontractors. I understand that I am prohibited by law from employing any individual to perform work under the permit issued in connection herewith, unless I provide proof of insurance to Lower Nazareth Township. After receipt of the permit, if I employ any other persons, I agree to notify Lower Nazareth Township and immediately provide proof of workers compensation coverage (NOTARY REQUIRED).

**Contractor is self-employed and uses subcontractors.** I have no employees and will use only subcontractors in performing the work under the permit issued in connection herewith. Prior to commencement of the work I have been provided with evidence or workers' compensation insurance coverage for each subcontractor I will use in performing the work. Alternately, I have been provided with evidence that non-covered subcontractors have no employees and I will not allow them to use employees on the job unless further evidence or worker's compensation coverage is provided to me **(NOTARY REQUIRED)**.

**Religious Exemption.** All of my employees who will perform work under the permit issued in connection herewith are exempt on religious grounds under Section 304.2 of the Worker's Compensation Act. By way of further explanation, I state the following: \_\_\_\_\_ **(NOTARY REQUIRED)**

**I agree that my failure to comply with the matters set forth in this Affidavit will result in a STOP WORK ORDER and it may not be lifted until proper Worker's Compensation coverage is obtained, or until further proof or exemption is submitted. I further agree that should any required Worker's Compensation coverage terminate during the progress of the work, that I will immediately notify Lower Nazareth Township and understand a STOP WORK ORDER will be issued until coverage is reinstated. My signature on this form constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. 94904 relating to unsworn falsifications to Lower Nazareth Township Municipal representatives or authorities.**

Contractor  
Signature \_\_\_\_\_

Name (Please Print) \_\_\_\_\_

Date \_\_\_\_\_

**NOTARY REQUIRED**

Subscribed and sworn to before me this

\_\_\_\_\_ day of 20\_\_\_\_ seal

\_\_\_\_\_  
(Signature of Notary Public)

My Commission expires: \_\_\_\_\_

# LOWER NAZARETH TOWNSHIP SAMPLE PLOT PLAN

This plan depicts the type of information you should provide when submitting a Zoning Permit. Arrows represent dimensions from property lines, structures, etc. which should be provided.

