

# Building and Zoning Permit Application

Permit No. \_\_\_\_\_

TOWNSHIP OF MOON 1000 BEAVER GRADE ROAD • MOON TOWNSHIP, PA 15108 • PHONE 412-262-1700 • FAX 412-262-5344

1. **Location of Proposed Construction:** \_\_\_\_\_  
(Street No.) (Street Name) (Suite No.)

2. **Applicant's Name:** \_\_\_\_\_ Email: \_\_\_\_\_  
Applicant's Address: \_\_\_\_\_  
Phone No.:(Cell) \_\_\_\_\_ (Office) \_\_\_\_\_ (Home) \_\_\_\_\_

3. **Type of Construction:**  Residential  Commercial  Industrial  Other (specify) \_\_\_\_\_

4. **Type of Improvement:**  New Construction  Alteration  Addition  Repair/Replace  Pool/Hot Tub  
 Foundation Only  Change of Use  Demolition  Other \_\_\_\_\_

5. **Proposed Use:**  One Family Dwelling  Pool/Hot Tub  Shed  Detached Garage/Carport  
 Deck  Attached Single Family Dwelling  Other (specify) \_\_\_\_\_

6. **What is the existing use of the building:** (if applicable) \_\_\_\_\_  
**What is the proposed change in use:** (if applicable) \_\_\_\_\_

7. **Property Information:** Zoning District: \_\_\_\_\_ County Lot and Block \_\_\_\_\_  
Subdivision Name: \_\_\_\_\_ Lot No. \_\_\_\_\_ Lot Size \_\_\_\_\_  
Owner's Name: \_\_\_\_\_  
Owner's Address: \_\_\_\_\_  
Owner's Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
Occupant's Name: \_\_\_\_\_ Occupant's Phone No.: \_\_\_\_\_  
Water Supply:  Public  Private Sewage:  Public  Private Type of Heat:  Gas  Electric  Other (specify) \_\_\_\_\_  
Gas Company \_\_\_\_\_

### Zoning Setbacks: (the distance between the structure and the property lines)

Front Yard: \_\_\_\_\_ Rear Yard: \_\_\_\_\_ Right Side: \_\_\_\_\_ Left Side: \_\_\_\_\_

8. **Building Code Information for proposed construction:** Total Cost of Construction \$ \_\_\_\_\_  
ICC Occupancy Classification \_\_\_\_\_ ICC Construction Type \_\_\_\_\_ (determined by Design Professional)  
Exterior Finish to Grade:  Brick  Siding  Other architectural finish (specify) \_\_\_\_\_  
Type of Frame:  Masonry  Wood  Structural Steel  Reinforced Concrete  Other (specify) \_\_\_\_\_

**For New Construction:** No. of Stories: \_\_\_\_\_ Total Height of Building: \_\_\_\_\_  Sprinklered?  
Size of Structure: Ft. Wide \_\_\_\_\_ Ft. Long \_\_\_\_\_ Total Area Per Floor: 1<sup>st</sup> \_\_\_\_\_, 2<sup>nd</sup> \_\_\_\_\_,  
3<sup>rd</sup> \_\_\_\_\_, Basement \_\_\_\_\_, Garage \_\_\_\_\_, Deck / Porch \_\_\_\_\_, Shed \_\_\_\_\_, Other \_\_\_\_\_

**For Interior Alterations:** No. of Stories of Existing Structure: \_\_\_\_\_ Type of Existing Construction \_\_\_\_\_  
What Floor(s) is the Alterations to occur? \_\_\_\_\_ Total Floor Area Altered \_\_\_\_\_  
Total Area of Existing Building \_\_\_\_\_ Year Built \_\_\_\_\_  Sprinklered?  
Additional Areas of Alterations and Floors \_\_\_\_\_

**For Additions:** No. of Stories of Existing Structure: \_\_\_\_\_  Existing Building Sprinklered?  Addition Sprinklered?  
No. of Stories (Addition): \_\_\_\_\_ Size of Addition: \_\_\_\_\_ x \_\_\_\_\_ Total Addition Area \_\_\_\_\_ Addition Ht.: \_\_\_\_\_

**For Repair/ Replacement:** Describe the existing structure to be repaired/replaced \_\_\_\_\_  
Describe the new construction \_\_\_\_\_ Total area repaired/replaced: \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_

**For Pools/Hot Tubs:**  Above ground  In ground Size: \_\_\_\_\_ x \_\_\_\_\_ Depth of Pool: \_\_\_\_\_  Diving Board

**For Demolition:** Describe structure (type of construction, use, size) \_\_\_\_\_ x \_\_\_\_\_

9. **Contractor Company Name:** \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Contractor's Address: \_\_\_\_\_  
Contractor's Office Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_  
License Information: \_\_\_\_\_

10. **Design Professional Company Name:** \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Designer's Address: \_\_\_\_\_  
Designer's Office Phone No.: \_\_\_\_\_ Email: \_\_\_\_\_

11. The applicant/owner hereby certifies that the statements made herein and representations contained in all accompanying matter part of this application are true and correct. The applicant/owner shall be responsible for reviewing and fully understanding all Permit conditions and insuring compliance to all applicable codes and ordinances. The applicant/owner shall also be responsible for any fees incurred in relation to the above project. The applicant/owner grants Moon Township officials the right to enter onto the property for the purpose of inspection the work permitted and posting notices. As applicant, I hereby certify that proposed work is authorized by the owner of record and I have been authorized by the owner to make this application as his authorize agent.

**Applicant**  
Signature: \_\_\_\_\_  
Date \_\_\_\_\_

**Owner**  
Signature: \_\_\_\_\_  
Date \_\_\_\_\_