CARBON COUNTY



Bureau Veritas NA 790A Parkway Drive Broomall, PA 19008 Phone 1-877-392-9445

Commercial Building Permit Application

Property Address: City:		Date: Zip:	
Owner	Address/city/zip	Phone	Email
Architect / Engineer	Address/city/zip	Phone	Email
Permit Applicant	Address/city/zip	Phone	Email
Improvement Type Please check New Construction Addition Alteration Demolition Change of Use Swimming Pool Other	Work Description:	Construction Co	ost

Proposed Use:	Factory	Residential
Assembly	F-1	R-1
A-1	F-2	R-2
A-2		R-3
A-3	High Hazard	R-4
A-4		
A-5	Institutional	Utility / Miscellaneous
Business	-1 -2	
	1-3	Storage
Education	1-4	S-1
(Grades 1-12)		S-2
Day Care	Mercantile	

Type of Construction		
I-A		
I-B		
II-A		
II-B		
III-A		
III-B		
IV		
V-A		
V-B		

FRANKLIN Township CARBON COUNTY



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Electrical Application	Total Service Amps	Phases – Single or Three	Voltage
YesNo			
Number of Transfer Switches	Number of Panels	Number of Transformers	Generators / Solar/ Win
Plumbing Application	Water Service	Sewer	Total DFU's / WSFU's
[esNo	PublicWell	Public On Site	
Aechanical Application	Heat Source	Cooling Source	Kitchen Hoods
es No			Type IType II
		cupancy; PA Dept of Health; F	A Elevator; Sewage
		cupancy; PA Dept of Health; F	PA Elevator; Sewage
Other Required Permit Applicate Please list numbers and support of Applicants.	ly documentation		PA Elevator; Sewage Date:
Please list numbers and supp	ly documentation		

official or the 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 code applicable to such permit.

CARBON COUNTY

enforce the provisions of the code applicable to such permit.



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Residential Building Permit Application

Property Address:City:		Date:	Date: Zip:	
Owner	Address/city/zip	Phone	Email	
			Email	
Contractor	Address/city/zip	Phone		
Improvement Type Please check New Construction	Work Description:	Description: Construction Cost		
Addition/Alteration			**************************************	
Repair/Replacement Demolition				
Deck				
Swimming Pool Manufactured Home				
Other		, , , , , , , , , , , , , , , , , , , ,		
Exterior Walls:	Total Square Feet: Number of Bedrooms:		edrooms:	
Steel	Work being done:			
Concrete	I 1	mbing HVA	-	
Masonry	Yes No Yes	No Yes_	No	
Wood Other:	Total Amps	Gas L	ines	
		Yes	No	
Print Name of Applicant:		Da	te:	
Signature of Applicant:				
I hereby certify that I am the owner of r	ecord or have been authorized by the ow	ner to this application as his / h	er agent and I agree to	

official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to