

Borough of Carlisle
 53 W. South Street
 Carlisle, PA 17013
 Phone: (717) 240-6930
 FAX: (717) 249-5587



This permit will not be processed until all required information is submitted.

APPLICATION FOR WORK PERMIT

ADDRESS:

Address of where the work is to be performed: _____

Type of Permit: Residential Commercial Is the property located in the Historic District? Yes No

PERMIT TYPE: (check the permit(s) that pertain to your project)

Construction Permit Plumbing Permit Electrical Permit HVAC Permit

Demolition Permit - ____ Residential Structure (\$50/unit) ____ All Other Structures (\$250/structure)
(Does NOT pertain to interior demolition.)

APPLICANT INFORMATION:

Property Owner/Lessee: _____ Mailing Address: _____ Phone #: _____

Contractor: _____ Mailing Address: _____ Phone #: _____

Contractor ID #: _____

The Borough of Carlisle does not verify the registration of home improvement contractors. Building permit applicants are advised to verify the registration of home improvement contractors by referring to the website of the Pennsylvania Office of Attorney General, Bureau of Consumer Protection at (www.attorneygeneral.gov/hic.aspx) or by calling this toll-free number: 1-888-520-6680. Complaints about home improvement contractors should be directed to that office.

COST OF CONSTRUCTION: Provide a copy of the contract, estimate or other documentation for the cost of construction. When computing costs listed below, the FAIR MARKET cost shall include: architect's fees, legal costs, engineering fees, labor, and materials. The fact that no or less than fair market cost may actually be incurred (due to the owner's doing the work himself/herself, obtaining the supplies free, etc.) shall not reduce the figures below.

	COST OF PROJECT	PERMIT FEE (Office Use Only)
Building:	\$	\$.00
Electrical:	\$	\$.00
Plumbing:	\$	\$.00
HVAC:	\$	\$.00
<i>Required State L&I Fee</i>		\$ 4.00 for each permit
TOTAL FEES	\$	\$.00

DESCRIPTION OF WORK TO BE PERFORMED, INCLUDING SIZE (SQ.FT.) OF WORK AREA:

OWNER/CONTRACTOR DESIGNATED STATE APPROVED INSPECTION AGENCY:

Accredited Services American Insp. Svcs. Approved Code Svcs.
 C. C. I. S. M. D. I. A. Pennsylvania Code Alliance

STRUCTURAL MATERIAL SPECIFICATIONS (for all projects performing structural work)

This section is not applicable to my project.

Exterior Walls: Steel Masonry Concrete Wood Other (specify)
Floor & Roof Framing: Steel Concrete Wood Other (specify):
If wood specify: Species: Spruce Pine Fir Other:
Engineered Lumber: : I-Joist Parallam LVL Trusses

CODE COMPLIANCE METHOD:

Energy Code used: International Residential Code International Energy Conservation Code
 PA Alternative Residential Energy Provisions
ComCheck/ResCheck submitted: Yes No Building Code Used: IRC IBC IEBC

PLUMBING LICENSE INFORMATION:

Borough of Carlisle Master Plumbing License No. _____
 Special Master Plumbing license - a copy of a current Master Plumbing License from another municipality with a comparable plumbing code. (An additional special license fee will be added to the permit fee.)
 Property owner who **owns and resides in the residential property**, used exclusively for living purposes, shall personally perform all plumbing work.

WORKER'S COMPENSATION INSURANCE

Yes - current certificate of insurance is on file with the Carlisle Borough Department of Public Works.
 No - see sworn affidavit attached hereto.

CERTIFICATION

I hereby certify that the information contained herein is complete and accurate, that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent, and that I agree to conform to all applicable laws of the Borough of Carlisle. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to make necessary inspections and to enforce the provisions of the code(s) applicable to such permit.

Signature of Owner or Contractor

Date

Print Name of Owner or Contractor

FOR CODE DEPARTMENT USE ONLY

Permit #	Date Issued:	Issued by:	Total Fee:
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