



CENTRE REGION CODE ADMINISTRATION  
 2643 Gateway Drive Suite #2  
 State College, PA 16801  
 Tel: 814-231-3056  
 WWW.CENTREREGIONCODE.ORG

Municipality  
**College Township**  
 1481 E College Ave  
 State College PA 16801

Building Permit No:  
 Zoning Permit No:  
 Water Permit:  
 Sewer Permit:

## APPLICATION FOR ZONING AND BUILDING PERMIT

PAGE 1 OF 4

ADDRESS:

<b>LOCATION OF PROPOSED WORK OR IMPROVEMENT</b>	
Municipality: <b>COLLEGE TOWNSHIP</b>	Tax Parcel No: _____
Street Address: _____	
Rural Directions: _____	

<b>TYPE AND COST OF WORK OR IMPROVEMENT</b>		
<b>Type of Property:</b> <input type="checkbox"/> Commercial <input type="checkbox"/> Residential <input type="checkbox"/> Current Rental <input type="checkbox"/> Proposed Rental	<b>Type of Improvement:</b> <input type="checkbox"/> New building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair, replacement <input type="checkbox"/> Demolition <input type="checkbox"/> Electrical ONLY <input type="checkbox"/> Sprinkler System ONLY	<b>Building Information:</b> <b>Dimensions:</b> Height (feet): _____ No of Stories: _____ Total Square footage: _____ <b>Type of sewage disposal:</b> <input type="checkbox"/> Public or private company <input type="checkbox"/> Private (on lot septic tank, etc.) <b>Type of water supply:</b> <input type="checkbox"/> Public or private company <input type="checkbox"/> Private (well, cistern)
<b>Declared cost</b> \$ _____		

**Describe proposed work:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Role:	Name	Address	Phone No	Email
<i>Owner</i>				
<i>Tenant</i>				
<i>Contractor</i>				
<i>Design Professional</i>				

**AFFIDAVIT**

I hereby certify that I am the owner in fee or the authorized agent of the owner in fee of the property upon which the work authorized by the permit sought will be performed. All work will be performed in accordance with all applicable laws of the Commonwealth of Pennsylvania and this jurisdiction.

Signature of applicant	Address	Application Date
Print Name	Phone #	Role



**ZONING PLANS EXAMINER NOTES**

Zone: \_\_\_\_\_

Lot Square Footage: \_\_\_\_\_

Percent Coverage: \_\_\_\_\_

Off-street parking spaces

Enclosed: \_\_\_\_\_

Outdoors: \_\_\_\_\_

Set Backs	North √	Required	Provided
Front			
Right Side			
Left Side			
Rear			

Notes: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Approved: \_\_\_\_\_ Date approved: \_\_\_\_\_ Permit No.: \_\_\_\_\_

**CODES PLANS EXAMINER NOTES**

OCCUPANCY INFORMATION

Type of Construction: \_\_\_\_\_ Use Group: \_\_\_\_\_

FLOOR	# OF UNITS	MAX OCC LOADS	MAX LIVE LOAD (lbs per sq.ft.)	FLOOR	# OF UNITS	MAX OCC LOAD	MAX LIVE LOADS (lbs per sq.ft.)
BASEMENT				SEVENTH FLOOR			
FIRST FLOOR				EIGHTH FLOOR			
SECOND FLOOR				NINTH FLOOR			
THIRD FLOOR				TENTH FLOOR			
FOURTH FLOOR				ELEVENTH FLOOR			
FIFTH FLOOR				ROOF			
SIXTH FLOOR				OTHER			

Approved: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Building Permit No: \_\_\_\_\_ Date Permit Issued: \_\_\_\_\_

Permit fee \$ \_\_\_\_\_ Deposit Paid \$ \_\_\_\_\_ Balance Due \$ \_\_\_\_\_

Deposit Date \_\_\_\_\_ Check/Cash \_\_\_\_\_ By \_\_\_\_\_

A large grid of graph paper, consisting of 20 columns and 30 rows of small squares, intended for drawing a site plan. The grid is empty and occupies the majority of the page.