



Dickinson Township ♦ 219 Mountain View Road ♦ Mount Holly Springs, PA 17065  
Phone: (717) 486-7424 ♦ Fax: (717) 486-8412  
[www.dickinsontownship.org](http://www.dickinsontownship.org)

## Application for Zoning/Building Permits

In accordance with the Uniform Construction Code (UCC)

Zoning Permit & UCC Administration ..... \$175.00

Zoning Permits – New Construction, Change of Use or New Use,  
Fences, Sheds and Detached Garages under 1,000 sq.ft. .... \$75.00

**PLEASE FILL OUT APPLICATION COMPLETELY OR IT WILL NOT BE ACCEPTED**

Location of Proposed Work or Improvement:

County: \_\_\_\_\_ Municipality: \_\_\_\_\_

Site Address: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_ Lot \_\_\_\_\_ Subdivision: \_\_\_\_\_

Owner of Property: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Applicant: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Architect: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Fax Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Work or Improvement: (Please Check One)

\_\_\_\_ New Construction    \_\_\_\_ Addition    \_\_\_\_ Alteration    \_\_\_\_ Repair

\_\_\_\_ Demolition    \_\_\_\_ Foundation Only    \_\_\_\_ Change of Use

\_\_\_\_ Mechanical    \_\_\_\_ Electrical    \_\_\_\_ Plumbing

Briefly describe the proposed work: \_\_\_\_\_

Estimated Cost of Construction: \$ \_\_\_\_\_

Square Footage of Construction: \_\_\_\_\_ sq.ft

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Description of Building Use: (Please Fill Out As Appropriate)

Residential	or	Non-Residential
<input type="checkbox"/> One Family Dwelling		Specific Use: _____
<input type="checkbox"/> Two Family Dwelling		Use Group: _____
<input type="checkbox"/> # of Bedrooms <u>pre construction</u>		Change in Use? <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> # of Bedrooms <u>post construction</u>		If yes, indicate former use: _____
<input type="checkbox"/> Total # of Rooms		Maximum Occupancy Load: _____
		Maximum Live Load: _____

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Building/Site Characteristics: (Please Respond as Appropriate or by Writing "N/A")

Number of Residential Dwelling Units: \_\_\_\_\_ Existing \_\_\_\_\_ Proposed \_\_\_\_\_  
Indicate Type of HVAC: \_\_\_\_\_ Electric \_\_\_\_\_ Gas \_\_\_\_\_ Oil Other: \_\_\_\_\_  
Water Service: \_\_\_\_\_ Public \_\_\_\_\_ Private  
Sewer Service: \_\_\_\_\_ Public \_\_\_\_\_ Private (Septic Permit Number: \_\_\_\_\_)

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Will your building contain any of the following:

Fireplaces? \_\_\_\_\_ No \_\_\_\_\_ Yes (Number \_\_\_\_\_ Fuel Type: \_\_\_\_\_ Vent Type: \_\_\_\_\_)  
Elevators, Escalators, Lifts, or Moving Walks? \_\_\_\_\_ No \_\_\_\_\_ Yes  
Sprinkler System? \_\_\_\_\_ No \_\_\_\_\_ Yes  
Pressure Vessels? \_\_\_\_\_ No \_\_\_\_\_ Yes  
Refrigeration System? \_\_\_\_\_ No \_\_\_\_\_ Yes

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Building Dimensions:

Existing Building Area: _____ sq. ft.	Number of Stories: _____
Proposed Building Area: _____ sq. ft.	Height of Structure above ground: _____ ft.
Total Building Area: _____ sq. ft.	Area of the Largest Floor: _____ sq. ft.

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Zoning District: \_\_\_\_\_

Setbacks: (All setbacks are measured from the street right-of-way line)

Required:	Provided:
Front _____ ft.	Front _____ ft.
Side _____ ft.	Side _____ ft.
Side _____ ft.	Side _____ ft.
Rear _____ ft.	Rear _____ ft.

Is this a corner lot?  Yes  No  
If so, you are required to meet the front yard setbacks from both streets that the property abuts.

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\*DICKINSON TOWNSHIP 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 THE ATTORNEY GENERAL, BUREAU OF CONSUMER PROTECTION AT [www.attorneygeneral.gov/hic.aspx](http://www.attorneygeneral.gov/hic.aspx) OR BY CALLING TOLL FREE 1-888-520-6680.

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Impervious Coverage:

New impervious area of construction including structures, driveways, parking areas, sidewalks, patios, ect:

\_\_\_\_\_ sq.ft.

Lot size: (1 acre is equal to 43,560 sq.ft.)

\_\_\_\_\_ sq.ft.

Total impervious coverage of lot: (includes new and existing)

\_\_\_\_\_ sq.ft.          \_\_\_\_\_ %

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Floodplain:

Is the site located within an identified flood hazard area? \_\_\_\_\_ No          \_\_\_\_\_ Yes  
If yes, will any portion of the flood hazard area be developed? \_\_\_\_\_ No          \_\_\_\_\_ Yes

If in hazard area, the Owner / Agent shall verify that any proposed construction and / or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3.

If in Floodplain,  
Level of Lowest Floor Above Grade: \_\_\_\_\_ ft.

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Please read the following before signing:

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved Building Code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. 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 the Municipality or any other governing body. The applicant certifies he / she understands all the applicable codes, ordinances, and regulations.

Application for a permit shall be made by the owner or lessee of the building or structure or agent of either, or by the registered design professional employed in connection with the proposed work.

I certify that the Code Administrator or the Code Administrator'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 (s) applicable to such permit.

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Signature of Owner or Agent

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Printed Name of Owner or Agent

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

Permit Number: \_\_\_\_\_

PLEASE CREATE A SITE PLAN ON THE FOLLOWING PAGE

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Site Plan:

The following is a requirement to be approved for both a Zoning Permit and a Building Permit. Please sketch the shape of the lot and include the following: Dimensions of the lot, Location of Existing Buildings, Location and Exterior Dimensions of the proposed construction, the Location of the Septic System and Location of the Well. Finally, Please include distances (in feet) between proposed construction and all property lines. **(If this information is not included, a permit cannot be issued).** If you are unsure of what the setback distances are in your particular Zoning District, please call Dickinson Township at 717-486-7424.

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As the Applicant, I realize that I am responsible for the correctness of and compliance to, all dimensions and setback distances as well as the proper location and accuracy of boundary lines for the subject property.

I hereby certify that the proposed work is authorized by the owner of the property and that I have been authorized by the owner to make application as the agent thereof. I certify that the work described herein will not be changed or altered.

Signature: \_\_\_\_\_

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



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***AFFIDAVIT OF EXEMPTION WORKERS COMPENSATION INSURANCE  
YEAR \_\_\_\_\_***

The undersigned affirms that he/she is not required to furnish Workers Compensation Insurance under the provisions of the Pennsylvania's Workers Compensation law for one of the following reasons:

\_\_\_\_\_ Property owner is performing the work. If property owner does hire contractor to perform any work pursuant to the Zoning/Building Permit, Contractor must provide proof of Workers Compensation Insurance to the municipality. Homeowner shall be liable for contractor compliance with this requirement.

\_\_\_\_\_ Contractor has no employees. Contractor prohibited by law from employing any individual to perform work pursuant to the Zoning/Building Permit unless contractor provides proof of Insurance to the municipality.

\_\_\_\_\_ Religious Exemption under the Workers Compensation Law Applies. All employees of contractor are exempt from the Workers Compensation Insurance (Attach copies of religious exemption letters for all employees).

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Printed Name of Owner or Agent

\_\_\_\_\_  
Date

# Municipal Notice to Conservation District for Earth Disturbance/Building Permit

Please fill out or have the applicant fill out the information below to determine the need for an erosion control plan or NPDES permit for earth disturbance projects. As per DEP regulations, the municipality shall notify the District of any projects that disturb one acre or more. You may FAX or e-mail the completed form to the District. The District will respond to the municipality within five days of receiving the form.

Municipality: \_\_\_\_\_

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Phone number/Email: \_\_\_\_\_

Type of project: Residential/Commercial/Other: \_\_\_\_\_

Please circle

Does your project propose an earth disturbance of more than 5000 square feet?

Yes Please answer next question.

No No further information required, however E&S BMP's may still be necessary on your project.

Does your project propose an earth disturbance of 1 acre or more?

Yes NPDES Permit is required, unless part of a project that already has permit coverage.

No If greater than 5000 square feet, and less than 1 acre, a written erosion control plan is required.

Project name and/or NPDES permit number if already permitted:

\_\_\_\_\_

\_\_\_\_\_

For additional assistance contact:  
Cumberland County Conservation District  
310 Allen Road, Suite 301  
Carlisle, PA 17013

717-240-7812  
FAX: 717-240-7813

Kim Falvey: [kfalvey@ccpa.net](mailto:kfalvey@ccpa.net)  
Vince McCollum: [vmccollum@ccpa.net](mailto:vmccollum@ccpa.net)  
Matt Stough: [mstough@ccpa.net](mailto:mstough@ccpa.net)

\_\_\_\_\_

## District Use:

Technician \_\_\_\_\_

Project requires an NPDES Permit?  Yes  No

NPDES Permit Application received by the Conservation District?  Yes  No

NPDES Permit acknowledged or issued?  Yes  No

\_\_\_\_\_

\_\_\_\_\_  
Signature of Owner or Agent

\_\_\_\_\_  
Date