



**WARWICK TOWNSHIP**  
 Dept. of Planning & Zoning  
 1733 Township Greene, Jamison, PA 18929  
 Phone: (215) 343-6100  
[www.warwick-bucks.org](http://www.warwick-bucks.org)

<p align="center"><b>For Warwick Township Use Only</b></p> <p>Check #:          Check Amount:          Received by:</p>
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**RESIDENTIAL PERMIT APPLICATION**

Permit #: \_\_\_\_\_

**Site/Contact Information**

Site Address: _____			Primary Contact Person (check)
Will this permit have any green certifications? (LEED, Energy Star, etc.) <input type="checkbox"/> YES <input type="checkbox"/> NO			
Property Owner	Name	PA Contractor's #	<input type="checkbox"/>
	Address		
	Phone	Email	
Applicant	Name	PA Contractor's #	<input type="checkbox"/>
	Address		
	Phone	Email	

**Project Type**

- |                                    |   |  |
|------------------------------------|---|--|
| <input type="checkbox"/> Addition  | <input type="checkbox"/> Basement or Attic Renovation | <input type="checkbox"/> Detached Garage |
| <input type="checkbox"/> Plumbing  | <input type="checkbox"/> Electrical                   | <input type="checkbox"/> Mechanical/HVAC |
| <input type="checkbox"/> Deck      | <input type="checkbox"/> Covered/Enclosed Porch       | <input type="checkbox"/> Paver Patio     |
| <input type="checkbox"/> Fireplace | <input type="checkbox"/> Fence                        | <input type="checkbox"/> Pool            |
| <input type="checkbox"/> Roof      | <input type="checkbox"/> Shed                         | <input type="checkbox"/> Other: _____    |

**Project Details**

Total Cost of Improvements: \_\_\_\_\_

Square Footage of Proposed Improvement: \_\_\_\_\_

Brief Description of Project: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

<p><b>Check each box below indicating that all of the following will be submitted with this application:</b></p> <p><input type="checkbox"/> Two (2) copies of site plan</p> <p><input type="checkbox"/> Two (2) complete sets of construction drawings</p> <p><input type="checkbox"/> One (1) set of specifications</p>
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By signing this form, the applicant is certifying that he/she is empowered by the owner of the property to make an application on his/her behalf. The applicant also gives Warwick Township permission to access the property for all necessary inspections.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

<b>General Contractor</b>	Name	PA Contractor's #
	Address	
	Phone	Email
<b>Mechanical/HVAC*</b>	Name	PA Contractor's #
	Address	
	Phone	Email
<b>Electrical*</b>	Name	PA Contractor's #
	Address	
	Phone	Email
<b>Plumbing*</b>	Name	PA Contractor's #
	Address	
	Phone	Email
<b>Roofing*</b>	Name	PA Contractor's #
	Address	
	Phone	Email
<b>Other*</b>	Name	PA Contractor's #
	Address	
	Phone	Email

\* If applicable

<b>MECHANICAL</b>			
<b>Type of Work</b> (Check one): <input type="checkbox"/> Installing New Equipment <input type="checkbox"/> Altering Existing System <input type="checkbox"/> Both		<b>Type of Fuel</b> (Check one): <input type="checkbox"/> Oil <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electrical <input type="checkbox"/> Propane <input type="checkbox"/> Other _____	
Total Cost of Mechanical Work: \$ _____			
Heater Name:		Number of Heaters:	
Model Number:		BTUs:	
A/C Name:		Number of A/C Units:	
Model Number:		BTUs:	
If altering existing system, explain:			
<b>PLUMBING</b>			
<b>Type of Work</b> (Check one): <input type="checkbox"/> Installing New Equipment <input type="checkbox"/> Altering Existing System <input type="checkbox"/> Both	<b>Does this project include:</b> <input type="checkbox"/> Water generators/heaters/coils <input type="checkbox"/> Lawn sprinkler system <input type="checkbox"/> Backflow preventer <input type="checkbox"/> Boiler <input type="checkbox"/> Other _____	<b>Will there be Underslab Plumbing?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Type of fixtures:</b>		<b>Plumbing Costs :</b>	
Number of fixtures:			
If altering existing system, explain:			
<b>ELECTRICAL</b>			
<b>Type of Work</b> (Check one): <input type="checkbox"/> Installing New Equipment <input type="checkbox"/> Altering Existing System <input type="checkbox"/> Both	<b>Wire Type:</b> _____ <b>Size:</b> _____ <b>Circuit Load:</b> _____	<b># of Hardwired Motor Electrical Devices:</b> _____ <b># of HP or KW:</b> _____	<b>Electrical Service:</b> _____ Amps <b>Check one:</b> <input type="checkbox"/> New <input type="checkbox"/> Upgrade
<b>Electrical Costs:</b>			

<b>Total # of Fixtures:</b>	If you are applying for a swimming pool permit, please note: No swimming pool in Warwick Township shall be filled from a public water system under the jurisdiction of the Warwick Township Water and Sewer Authority without written permission of the Authority.
<b>Pool Bonding:</b> <input type="checkbox"/>	
<b>If altering existing system, explain:</b>	

**Impervious Surface Calculation Worksheet**

**Required for the following permits:** Addition, Detached Garage, Deck, Covered/Enclosed Porch, Paver Patio, Pool, Shed, Pool, and Other

**Impervious Surface:** A surface that does not absorb rain. All buildings, parking areas, driveways, roads, sidewalks, and any areas in concrete and asphalt shall be considered impervious surfaces within this definition. In addition, all other areas determined by the Township Engineer to be impervious within the meaning of this definition will also be classified as impervious surfaces.

A. Lot Size (1 Acre = 43,560 square feet): \_\_\_\_\_ sq. ft.

**EXISTING**

B. House Footprint: \_\_\_\_\_ sq. ft.

C. Driveway(s)/Parking Lot(s): \_\_\_\_\_ sq. ft.

D. Walkway(s)/Sidewalk(s): \_\_\_\_\_ sq. ft.

E. Porches: \_\_\_\_\_ sq. ft.

F. Patio(s): \_\_\_\_\_ sq. ft.

G. Deck(s): \_\_\_\_\_ sq. ft.

H. Accessory Structures/Garages/Shed(s): \_\_\_\_\_ sq. ft.

I. Pools/Spas: \_\_\_\_\_ sq. ft.

J. Miscellaneous/Other: \_\_\_\_\_ sq. ft.

**L. Existing Impervious Surface Subtotal** (add B through J): \_\_\_\_\_ sq. ft.

**PROPOSED**

M. Proposed Construction: \_\_\_\_\_ sq. ft.

N. Total Impervious Surface Post Construction (L + M): \_\_\_\_\_ sq. ft.

O. **Proposed Impervious Percentage** (N divided by A \* 100): \_\_\_\_\_ %

**To be filled in by Township Staff**

*Permit Submission Checklist*

- |   |                              |                             |
|---|------------------------------|-----------------------------|
| Permit Deposit. Amount: \$ _____                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2 copies of plot plan showing:                  | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| a. existing and proposed construction           | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. distance to property lines (front/rear/side) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 1 copy of manufacturer's specifications         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the Impervious Surface Sheet completed?      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Is the application signed?                      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Green Building Discount Form (optional)         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| TMP #:  | 51— _____ — _____            |                             |

**Zoning District** (circle one):

RA	R-1	R-1a	R-2	RG	RR	MF-1	MF-2	MHP	C-1	C-2	C-3	V-C	V-CII	LI	O	H
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**Zoning Use:** \_\_\_\_\_

- Is the property in the Corridor Overlay District?  YES  NO
- Is the property in any of the Floodplain Districts?  YES  NO
- \*Are there any variances or easements which will affect this permit?  YES  NO

UCC Construction Type: \_\_\_\_\_ UCC Use Group: \_\_\_\_\_

Reviewers	Signature	Date	Status
Zoning Officer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Building Code Official			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Fire Marshal			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Public Works			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Engineer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Water & Sewer			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Board of Health			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Conservation District			<input type="checkbox"/> Approved <input type="checkbox"/> Denied
Other			<input type="checkbox"/> Approved <input type="checkbox"/> Denied

Reason for denial: \_\_\_\_\_

Fees

Zoning: \$ \_\_\_\_\_

Building: \$ \_\_\_\_\_

Engineer Review: \$ \_\_\_\_\_

Other: \$ \_\_\_\_\_

UCC Surcharge: \$ \_\_\_\_\_

Total Fee charged: \$ \_\_\_\_\_