



## West Manheim Township, York County, PA

2412 Baltimore Pike Hanover, PA 17331

Ph: (717)632-0320 ▪ Fax: (717)632-2499 ▪ [www.westmanheimtwp.com](http://www.westmanheimtwp.com)

### Application for Addition or Alteration

#### Location of Improvement –

Property Address: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lot: \_\_\_\_\_

Cross Streets: \_\_\_\_\_ and \_\_\_\_\_

Map & Parcel: \_\_\_\_\_ Zoning District: \_\_\_\_\_ (R,F,C-I, BC,RR,SR)

Water System: Public \_\_\_\_\_ Private \_\_\_\_\_ / Sewage Disposal: Public \_\_\_\_\_ Private \_\_\_\_\_ / Sprinklers: Y/N

#### Owner Information –

Property Owner Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

#### Contractor Information – (if applicable)

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

Contractors PA Home Improvement License #: \_\_\_\_\_

#### Type of Improvement -

Addition /  Alteration (please fill out the appropriate following sections)

#### Addition Information –

Square Footage of Addition: \_\_\_\_\_ New Stories: \_\_\_\_\_ New Bedrooms: \_\_\_\_\_

New Full Baths: \_\_\_\_\_ New Half Baths: \_\_\_\_\_

#### Alteration Information –

Square footage of Alteration: \_\_\_\_\_ New Bedrooms: \_\_\_\_\_ New Full Baths: \_\_\_\_\_ New Half Baths: \_\_\_\_\_

New plumbing fixtures : Yes  No  New electrical fixtures: Yes  No

**Required at Submission –**

- \_\_\_\_\_ Drawing of addition (location, dimensions, distance to property lines & easements) **OR**  
Drawing of area within house to be altered with before and after information
- \_\_\_\_\_ Constructions specs and building plans for addition
- \_\_\_\_\_ Location of new plumbing & electrical fixtures
- \_\_\_\_\_ Submission of Contractor's Workers Compensation Certificate (if applicable)
- \_\_\_\_\_ Stormwater Management Plan designed by a professional engineer (addition over 1000 sq ft)
- \_\_\_\_\_ Submission of stormwater review fee of \$100.00 (cash or check payable to West Manheim Twp)
- \_\_\_\_\_ Application fee of \$65.00 due at time of submission. ***Additional fees to follow.***  
Cash or check made payable to West Manheim Township

Estimated Project Cost of Improvement: \$ \_\_\_\_\_

***\*\*Please remove the last page of this packet. Page contains information & specifications for construction \*\****

**CERTIFICATION**

I hereby certify 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/her authorized agent and understand and assume responsibility for the establishment of the official property lines for required setbacks prior to start of construction and agree to conform to all applicable laws of this jurisdiction. I further certify that this information given is true and correct to the best of my knowledge.

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

# Workers' Compensation Insurance Coverage Information

(Attach to building application)

A. **The applicant is:** \_\_\_\_\_

A contractor within the meaning of the Pennsylvania Worker's Compensation Law

YES       NO

If the answer is "yes," complete Sections B and C below as appropriate.

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## B. Insurance Information

Name of Applicant: \_\_\_\_\_

Federal or State Employer Identification No.: \_\_\_\_\_

Applicant is qualified self-insurer for workers' compensation.

*Certificate attached*

Name of Workers' Compensation Insurer: \_\_\_\_\_

Workers' Compensation Insurance Policy No.: \_\_\_\_\_

*Certificate attached*

Policy Expiration Date: \_\_\_\_\_

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## C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

Contractor with no employees. **Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the township.**

Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
(Signature of Notary Public)

My commission expires: \_\_\_\_\_

(seal)

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

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

County of: \_\_\_\_\_

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

### Municipal/Inspector Use

Zoning Code: \_\_\_\_\_

Building Code: \_\_\_\_\_

Floodplain:  Yes  No

Stormwater Required:  Yes  No

Septic Upgrade Required:  Yes  No

Building Plan Review: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

Codes Administrator: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

Electric Plan Review: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

Third Party Inspector: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

Utilities Plan Review: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

Zoning Plan Review: Approved: \_\_\_\_\_ Not App'd: \_\_\_\_\_ Date: \_\_\_\_\_ Code Official: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Third Party Inspections Fees:		Township Fees	
Plan Review:	\$	Building Application Fee:	\$65.00
Building:	\$	Finished Area x \$0.30	\$
Electrical:	\$	PA State Fee:	\$4.50
Plumbing:	\$	Electrical App + Inspection:	\$
Mechanical:	\$	Plumbing App + Inspection:	\$
Sprinkler	\$	Mechanical App + Inspection:	\$
Insulation	\$	Building Inspection:	\$
Other:	\$	Plan Review:	
Other:	\$	Other:	
Other:	\$	Stormwater:	
Other:	\$	Zoning Application:	\$50.00
<b>Total MDIA Fees:</b>	<b>\$</b>	<b>Total Twp Fees:</b>	<b>\$</b>

## **Additions/Alterations**

Stormwater management is required for all additions. – Type of system is dependent upon site location and size of impervious improvements.

**\*\*It is the property owner's responsibility to know where their property lines and easements areas are located, and apply for the permits accordingly. \*\***

### **Required Inspections**

(Inspections for Alterations begin at #4)

1. Site Inspection, Property Corners, Structure Corners, and Driveway at road intersection, all located.
2. Inspection of footers prior to pouring of concrete.
3. Foundation (Footer drain system, Waterproofing, Plumbing below basement finish floor).
4. Framing (with rough-in components that will be covered with building materials).
5. Sprinkler Test
6. Plumbing and pressure test plus mechanicals.
7. Insulation
8. Drywall
9. Storm water system (prior to covering leaders & pits)
10. Final for Use and Occupancy Permit
  - \* Plumbing
  - \* Sewer (public & onsite)
  - \* Electrical
  - \* Water (public & private)
  - \* Mechanical

Please call the township office 24 hours in advance to schedule inspections.

Office Phone Number: 717-632-0320

Open 8am – 5pm