

**A SIGNED COPY OF THE CONTRACT MUST BE SUBMITTED WITH APPLICATION**



Tax Parcel # \_\_\_\_\_  
Date \_\_\_\_\_

**SWIMMING POOL, SPA & HOT TUB  
PERMIT APPLICATION**

*Willistown Township  
688 Sugartown Road  
Malvern, PA 19355*

Phone 610.647.5300 Fax 610.647.8156

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Swimming pools, spas, and hot tubs are regulated by the 2009 International Residential Code (IRC) in adopted Appendix G.

The following are required inspections:

- a) Steel
- b) Bonding of Steel
- c) Pool Electrical Equipment (third party certified)
- d) Entrapment Protection
- e) Barrier Requirements
- f) Grading

In order to issue a permit, all of the above items will be addressed in the submitted construction documents. IRC 2006, Section R106.1, Construction Documents, lists an exception to the provision that allows the Building Official to waive the requirement that submitted documents be prepared by a registered design professional.

Construction documents submitted will indicate that the requirements of Appendix G will comply.

In the event that the installation and or location requires a change of grading to existing conditions, a grading plan will accompany the application. (See R401.3 2006 IRC and Chapter 73 of the Code of the Township of Willistown, specifically Article II, Conservation Practices.)

A certificate of occupancy is a requirement and is use precedent. This means that the pool, spa, or hot tub is not to be used for its intended purpose until the certificate of occupancy is issued. Use prior to the issuance of the certificate of occupancy is a violation of the Code (see R113, Violations) and will be treated as such, as allowed by the Code.

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**Swimming Pool & Barrier  
Electrical & Zoning Permit Requirements**

1. Please keep all paperwork attached as given and return entire packet.
2. Zoning Permit is required and a \$100.00 fee must be paid when the entire application is submitted.
3. Site plan is required.
4. Electrician must be registered.
5. Two sets of construction drawings are required.
6. Property owner is required to sign applications in required fields.
7. Barrier must be shown in construction documents.
8. IF heated, gas inspection form to be completed.

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PERMIT APPLICATION**

*Willistown Township  
688 Sugartown Road  
Malvern, PA 19355*

Phone 610.647.5300 Fax 610.647.8156

**Property Address/Site Location:**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Contractor Information:**

Name of Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**I hereby certify 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 agent and we agree to conform to all applicable laws of this jurisdiction. All work is to be done in accordance with Willistown Township ordinances.**

Contractor's Signature \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Pool Type – NSPI Designation:**

1. In-ground Pool \_\_\_\_\_

Type O \_\_\_\_\_ Type I \_\_\_\_\_ Type II \_\_\_\_\_

Type III \_\_\_\_\_ Type IV \_\_\_\_\_ Type V \_\_\_\_\_

2. Diving Board Length \_\_\_\_\_ Height Above Water \_\_\_\_\_

3. Above-ground Pool \_\_\_\_\_ Fold-up Ladder \_\_\_\_\_

4. Pool Cover \_\_\_\_\_ Type of Cover \_\_\_\_\_

**INSPECTIONS REQUIRED:**

1. Steel Reinforcement, if applicable \_\_\_\_\_

2. Steel Wall Assemblies, if liner pool \_\_\_\_\_

3. Electrical (2) Bonding and Final\* \_\_\_\_\_

\*These inspections are done by a third party inspection agency.

4. Final Inspection for Use and Occupancy \_\_\_\_\_

\*Barrier must be in place prior to this inspection.

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**ADDITIONAL REQUIRED:**

1. **Attach a plot plan** (show drawing of dimensions to property lines).
2. **Please submit two sets of plans with application which indicate cross section with dimensions per NSPI or ICC and a plan view.**
3. **Cost of Improvement/Work** \_\_\_\_\_ (labor and materials only)
4. **This permit application includes a barrier permit.**

**I hereby certify that the signature below is that of the legal owner of the subject property, subject to penalty of law for unsworn statements to public officials:**

**Property Owner's Signature** \_\_\_\_\_  
Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

\_\_\_\_\_  
*Please do NOT write below this line*

Permit # \_\_\_\_\_ Date Received \_\_\_\_\_ Date Issued \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

Code Administration Officer \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Reason for Disapproval \_\_\_\_\_

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**WILLISTOWN TOWNSHIP  
CHESTER COUNTY, PENNSYLVANIA**

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**The Implementation of the “Contractor’s Proof” Provision  
of the Workers’ Compensation Reform Act  
Act 44 of 1993  
Effective August 31, 1993**

The Workers’ Compensation Reform Act was signed into law as Act 44 of 1993 by Acting Governor Mark Singel on July 2, 1993. The law took effect on August 31, 1993.

Included in the act is a provision that requires all municipalities that issue building permits to require proof of workers’ compensation insurance prior to issuing a building permit to a contractor or to require an affidavit stating that the contractor does not employ other individuals and, therefore, is not required to carry workers’ compensation insurance. An affidavit, by statutory definition, must be notarized.

The Building Permit:

Under the act, each municipality must include in its building permit the name of the contractor, workers’ compensation policy number, the name of the insurance company, and the contractor’s federal or state employer identification number (EIN). If the contractor signs an affidavit stating that he has no employees and is not required to carry workers’ compensation insurance, the building permit must then state the contractor’s federal or state employer identification number and a notation that the contractor has no other employees and does not carry workers’ compensation insurance and that the contractor is not permitted to employ any individuals to perform work under the building permit.

As proof of insurance, the township requires the contractor to supply either directly or through the contractor’s insurer or agent a workers’ compensation certificate, which includes the effective date of the coverage and the signature of the insurer. This certificate must be kept on file with the building permit.

Application by Non-Contractors:

Act 44 does not address building permit applications for non-contractors. There is nothing in the act or in court decisions that offers guidance to townships on issuing building permits to property owners who may or may not hire a contractor to perform some or all of the work. Under Act 44, the following seems to be clear:

- Property owner applicants are not “contractors” within the meaning of the Workers’ Compensation Law.
- The language of the act requiring townships to obtain certificates of workers’ compensation coverage refers only to “contractors.”

We conclude, therefore, that we are not required to obtain such certification from a property owner as a pre-condition to issuing a building permit.

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**WILLISTOWN TOWNSHIP  
CHESTER COUNTY, PENNSYLVANIA**

**Workers' Compensation Insurance Coverage Information**

A. The applicant is a contractor within the meaning of the Pennsylvania Workers' Compensation Law:

Yes  No

If yes, complete Sections B and C below as appropriate.

B. Insurance Information:

Federal or State Employer Identification Number \_\_\_\_\_

Applicant is a qualified self-insurer for Workers' Compensation. Certificate attached [ ]

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

Workers' Compensation Insurance Policy Number \_\_\_\_\_

Certificate attached  Policy Expiration Date \_\_\_\_\_

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 is 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

\_\_\_\_\_  
Commission Expires

**Property Owner's Signature** \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

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**BARRIER PERMIT APPLICATION**

*Willistown Township*  
*688 Sugartown Road*  
*Malvern, PA 19355*  
Phone 610.647.5300 Fax 610.647.8156

**Owner's Property Address:**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Site Property Address:**

Address \_\_\_\_\_ Lot # \_\_\_\_\_  
Zoning District \_\_\_\_\_

**Contractor Information:**

Name of Company \_\_\_\_\_ Cost of Improvement /Work \_\_\_\_\_

**Type of Barrier:** \_\_\_\_\_ Privacy \_\_\_\_\_ Agricultural \_\_\_\_\_ Pool \_\_\_\_\_ Other

Explain "Other" Barrier Type \_\_\_\_\_

Setbacks: Front \_\_\_\_\_ ft. Side \_\_\_\_\_ ft. Side \_\_\_\_\_ ft. Rear \_\_\_\_\_ ft.

Height of Barrier \_\_\_\_\_ ft. Solid \_\_\_\_\_ 50% Open or More \_\_\_\_\_  
Yes/No Yes/No

**Adjoining Property Owners' Names:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Barrier Drawings:** An elevation architectural drawing or suitable reproduction of such drawing from promotional materials of the manufacturer of the fence proposed to be erected indicating, to scale, the material, colors and surface, treatment, components, dimensions, manner of connection, alteration of direction, and manner of installation of the proposed fence.

**Plot Plan:** A plot plan must be submitted to the Township, showing the outer bounds of the property(s) on which the fence is proposed to be erected with at least the accuracy of the official Chester County Tax Maps for Willistown Township and indicating, to scale, the proposed location of the fence in plan view. Please reference the title owner of the properties immediately adjoining the subject properties of where the proposed fence is to be constructed.

Applicant certifies that all information contained herein is true and accurate as submitted.

**Property Owner's Signature** \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

*Please do NOT write below this line*

Permit # \_\_\_\_\_ Date Received \_\_\_\_\_ Date Issued \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

Code Administration Officer \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Reason for Disapproval \_\_\_\_\_

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**AGREEMENT BETWEEN PROPERTY OWNERS  
CONCERNING THE CONSTRUCTION OF SOLID FENCING  
ON THE PROPERTY LINE BETWEEN  
THE STATED PROPERTY OWNERS**

This agreement is made between the listed property owners concerning the construction of solid fencing on the property line between the listed property owners.

This agreement is in accordance with § 139-105 D. of Ordinance No. 6 of 2006 which certifies that the property owners are aware of and do hereby agree with the construction of solid fencing on the property line adjacent to their property.

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

**Signature of Property Owner:** \_\_\_\_\_

**Property Location:** \_\_\_\_\_

**Adjoining Property Owners' Signatures:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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**§ 139-105. Fences or walls. [Amended 7-26-1994 by Ord. No. 2-1994; 12-17-2001 by Ord. No. 6-2001; 7-19-2004 by Ord. No. 6-2004; 11-27-2006 by Ord. No. 6-2006.]**

A. The construction or erection of all fences and walls shall be in strict conformity with all of the regulations of this section, together with any regulations not inconsistent herewith found elsewhere in this chapter.

B. No fence or wall or portion or component thereof (except a retaining wall or a wall of a building permitted under the terms of this chapter) over six feet in height from the natural grade adjoining the fence or wall at any point shall be erected.

C. The Zoning Officer may waive the height limitation in Subsection B for the construction or maintenance of a fence erected to enclose a recreation facility, such as a tennis court, so long as the fence is integral to the recreation use and complies with the required building setbacks applicable to the zoning district.

D. A fence 50% or more open, when viewed at a 90-degree angle, may be permitted along or within the limits of the property lines of a lot. No solid fence or wall less than 50% open, when viewed at a 90-degree angle, or any portion or component thereof, shall be erected on a lot unless the fence or wall complies with the required building setbacks applicable to the zoning district. The Zoning Officer may permit, upon written agreement between or among property owners affected by the wall or fence, the erection of a solid landscaping wall or fence along or within the area of a lot bounded by the property lines and the required building setbacks.

E. No fence or portion or component thereof shall be erected within the street right-of-way or cause obstruction of sight distance at intersections or impede water flow of swales and streams.

F. No fence or portion or component thereof shall be erected on or after the effective date of this section unless and until the owner of the property on which the fence is to be located shall have first obtained from the Zoning Officer a zoning permit therefore. Applications for fence zoning permits shall be on the form prepared for this purpose by the Zoning Officer or his designee from time to time, and the requisite fee for the issuance of such permit shall be determined by the Board from time to time by resolution. No zoning permit for a fence shall be issued except following review of the application therefore which shall include, in addition to such other materials as may be specified on the application form, a plot plan of the outer bounds of the property(s) on which the fence is proposed to be erected with at least the accuracy of the official Chester County Tax Map for the Township and indicating, to scale, the proposed location of the fence in plan view; an indication by note or by reference disclosing the title owner of the properties immediately adjoining the subject property and the nature of their development; an elevation architectural drawing or suitable reproduction of such drawing from promotional materials of the manufacturer of the fence proposed to be erected indicating, to scale, the materials, colors, surface treatment, components, dimensions, manner of connection and alteration of direction and manner of installation of the proposed fence; and the name of the contractor performing the installation.

G. The requirement for a permit in Subsection F hereof is waived for the construction or maintenance of a fence erected to enclose an agricultural use, provided that the construction or maintenance shall meet the other requirements of this section. No other permits which may be required under law are waived by this subsection.

H. The requirements of this section are not to be intended to supersede or alter the requirements of any other section of this Code.

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Date \_\_\_\_\_

**ZONING PERMIT APPLICATION**

**Fee: \$100.00\***

*Willistown Township  
688 Sugartown Road  
Malvern, PA 19355*

Phone 610.647.5300 Fax 610.647.8156

**Property Address/Site Location:**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Zoning District \_\_\_\_\_

**Request for the following:**

_____ Addition	_____ Single Family Dwelling	_____ Alteration
_____ Commercial Building	_____ Storage Shed	_____ Garage
_____ Sign	_____ Swimming Pool	_____ Tent
_____ Change in use (Commercial use ONLY)	_____ Wall	_____ Fence
		_____ Other

Proposed Use \_\_\_\_\_ Building Area \_\_\_\_\_

**Setbacks:** Front \_\_\_\_\_ft. Rear \_\_\_\_\_ft. Side \_\_\_\_\_ft. Side \_\_\_\_\_ft.  
Structure Height \_\_\_\_\_ft. Acres \_\_\_\_\_ Lot Area \_\_\_\_\_sq.ft.

Percentage of lot to be covered by structure \_\_\_\_\_ %

Percentage of lot to be covered by impervious materials \_\_\_\_\_ %

The applicant shall submit two copies of a site plan drawn to scale. The site plan shall show actual dimensions of the lot including easements, the exact size and location of all existing and proposed buildings on the lot, and setback distances from buildings to property lines. No existing or new building shall be changed in its use in whole or in part until the Willistown Township Zoning Officer has issued a Zoning Permit. The Zoning Officer shall have up to five working days to review the application and may consult technical agencies prior to the approval of any permit. All zoning application fees are required at the time application is submitted.

Applicant certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the Zoning Permit.

**Property Owner's Signature** \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

**\*permit fees due at time of submission**

*Please do NOT write below this line*

Permit # \_\_\_\_\_ Date Received \_\_\_\_\_ Date Issued \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

Zoning Officer \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Reason for Disapproval \_\_\_\_\_

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**WILLISTOWN TOWNSHIP  
ZONING PERMITS**

**What is a Zoning Permit?**

Willistown Township is divided into eleven (11) different zoning districts with nine (9) different overlays within several of the eleven (11) zoning districts. The Zoning Ordinance describes the uses permitted in each district and establishes the standards that uses must meet to be allowed in the districts. The zoning permit procedure is established to ensure that uses specifically proposed to be located in a particular district meet the standards for that district.

**Do I need a Zoning Permit?**

The Zoning Officer will help you determine if you need a zoning permit. A zoning permit endorsement is required before the issuance of all building permits. A separate zoning permit application is needed only when an existing commercial use of a structure is proposed to be changed and no building permit is involved. Examples include the change of general office to the use of a doctor's office or the change of general office to the use of a restaurant.

**How do I apply and how much does it cost?**

Application forms and filing information are available at the Willistown Township Administrative Offices, 40 Lloyd Avenue, Suite 204/206, Malvern, PA 19355. An application requires a filing fee of \$75.00 to be paid before the issuance of the permit.

**How are Zoning Permits reviewed and decided?**

The Zoning Officer checks the application and all data to see that all provisions of the Zoning Ordinance are complied with. If architectural and site plan approval is also required for the proposed use, the zoning permit request is referred to the Building Department for review and comment.

If the Zoning Officer finds that the proposed use complies with all applicable provisions of the Zoning Ordinance, the zoning permit will be issued and a written record maintained of the findings. If all of the provisions of the ordinance are not complied with, it will be denied and all reasons set forth in writing.

**How long does it take and when does a Zoning Permit become effective?**

It usually takes no more than three working days for review and approval, or denial, of an application. Some more complicated applications may take longer. A Zoning Permit becomes effective upon approval by the Zoning Officer.

**What happens if my request is denied?**

If the Zoning Officer denies a zoning permit request, the decision may be appealed to the Zoning Hearing Board as described in the Township Code.

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**BUILDING AND IMPERVIOUS COVERAGE WORKSHEET**

In accordance with Ordinance No. 1 of 2001, all new construction and remodeling projects must meet the requirements of the Building and Impervious Coverage percentages as described in the ordinance.

**Total Lot Area:** \_\_\_\_\_ sq.ft.

*Property where construction is to be completed*

**Building Coverage:**

*Calculated in square footage (footprint only)*

<b><u>Structures</u></b>	<b><u>Present</u></b>	<b><u>New</u></b>	<b><u>Total</u></b>
House/Additions	_____	_____	_____
Porch	_____	_____	_____
Deck	_____	_____	_____
Garage	_____	_____	_____
Storage Buildings	_____	_____	_____
Other	_____	_____	_____
<b>Total</b>	_____	_____	_____

**Impervious Coverage:**

*Calculated in square footage (footprint only)*

<b><u>Areas</u></b>	<b><u>Present</u></b>	<b><u>New</u></b>	<b><u>Total</u></b>
Driveways	_____	_____	_____
Walkways	_____	_____	_____
Patios	_____	_____	_____
Pool and Coping	_____	_____	_____
Other	_____	_____	_____
<b>Total</b>	_____	_____	_____

**Definitions:**

**Building Coverage:** The aggregate of the maximum horizontal cross-section areas of all the buildings on a lot, excluding cornices, eaves, gutters, chimneys projecting not more than 18 inches, bay windows not extending through more than one story and not projecting more than five feet, uncovered steps and balconies, but including porches, breezeways and carports.

**Impervious Coverage:** Material which is or is likely to become impenetrable and unable to absorb water, including but not limited to buildings, structures and paved or graveled areas (driveways, parking lots, sidewalks, terraces, patios, swimming pools, tennis courts, etc.)

*Please do NOT write below this line*

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**Total Building Coverage Percentage**

\_\_\_\_\_ *Proposed*

\_\_\_\_\_ *Allowed*

**Total Impervious Coverage Percentage**

\_\_\_\_\_ *Proposed*

\_\_\_\_\_ *Allowed*

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Date \_\_\_\_\_

**ELECTRICAL PERMIT APPLICATION**

*Willistown Township*  
*688 Sugartown Road*  
*Malvern, PA 19355*

Phone 610.647.5300 Fax 610.647.8156

PA State Registration # \_\_\_\_\_ Cert Ins \_\_\_\_\_ Liability \_\_\_\_\_ W/C \_\_\_\_\_  
ICC Certification # \_\_\_\_\_ WT Registration # \_\_\_\_\_

**Property Address/Site Location:**

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Property Owner's Signature** \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

**Contractor Information:**

Name of Company \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**I hereby certify 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 agent and we agree to conform to all applicable laws of this jurisdiction.**

Contractor's Signature \_\_\_\_\_

Please Print Name \_\_\_\_\_ Telephone Number \_\_\_\_\_

**1. Description of Electrical Work & Size of Service** \_\_\_\_\_

**2. Attach documentation of proposed work. New service requires load calculations at 400A or less.**  
(E3502.2 & RC2009)

**3. Cost of Improvement/Work** \_\_\_\_\_ (labor and materials only)

**Third Party Required by Willistown Township (Proof of Inspection MUST be sent to Township)**

United Inspection Agency, Inc.  
35 Clayburgh Road  
Thornton, PA 19373  
Phone 610.399.5094 Fax 610.399.5126

*Please do NOT write below this line*

Permit # \_\_\_\_\_ Date Received \_\_\_\_\_ Date Issued \_\_\_\_\_ Amount Paid \$ \_\_\_\_\_

Code Administration Officer \_\_\_\_\_ Date \_\_\_\_\_

Approved \_\_\_\_\_ Reason for Disapproval \_\_\_\_\_

