

Classification: \_\_\_\_\_ Date Received: \_\_\_\_\_ Building Permit No #: \_\_\_\_\_

Classification Number: \_\_\_\_\_ Tax Parcel No. 54- \_\_\_\_\_

**APPLICATION FOR PLAN  
EXAMINATION AND  
BUILDING PERMIT**

Property Owners Signature(s) \_\_\_\_\_

*\*ALL names on deed must sign*

**IMPORTANT** – Applicant to complete all items in sections: *I, II, III, & IV*

<b>I. LOCATION OF BUILDING</b>	At (Location) _____ Zoning District _____ <small>(No.) (Street)</small>
	Between _____ and _____ <small>(CROSS STREET) (CROSS STREET)</small>
	Subdivision _____ Lot _____ Block _____ Lot Size _____

**II. TYPE AND COST OF BUILDING – ALL APPLICANTS COMPLETE PARTS A - D**

<b>A. TYPE OF IMPROVEMENT</b> 1. <input type="checkbox"/> New Building 2. <input type="checkbox"/> Addition (If residential, enter number of new housing units added, if any, in Part D, 13) 3. <input type="checkbox"/> Alteration (See 2 above) 4. <input type="checkbox"/> Repair, replacement 5. <input type="checkbox"/> Demolition 6. <input type="checkbox"/> Moving (relocation) 7. <input type="checkbox"/> Foundation only	<b>D. PROPOSED USE – For “Demolition” most recent use.</b> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; text-align: center; border-bottom: 1px solid black;"><u>Residential</u></td> <td style="width:33%; text-align: center; border-bottom: 1px solid black;"><u>Non-residential</u></td> </tr> <tr> <td style="padding: 5px;">                     12. <input type="checkbox"/> One family                      13. <input type="checkbox"/> Two or more – <i>Enter number of units</i> → _____                      14. <input type="checkbox"/> Transient hotel, motel, or dormitory – <i>Enter number of units</i> → _____                      15. <input type="checkbox"/> Accessory Structure                      16. <input type="checkbox"/> Swimming Pool                      17. <input type="checkbox"/> Other – <i>Specify:</i> _____                      _____                      _____                 </td> <td style="padding: 5px;">                     18. <input type="checkbox"/> Assembly [A]                      19. <input type="checkbox"/> Business [B]                      20. <input type="checkbox"/> Educational [C]                      21. <input type="checkbox"/> Factory [F]                      22. <input type="checkbox"/> Institutional [I]                      23. <input type="checkbox"/> Mercantile [M]                      24. <input type="checkbox"/> Residential [R]                      25. <input type="checkbox"/> Storage [S]                      26. <input type="checkbox"/> Utility [U]                      27. <input type="checkbox"/> High Hazard [H]                      28. <input type="checkbox"/> UST-AST                      29. <input type="checkbox"/> Other – <i>Specify</i> _____                 </td> </tr> </table>	<u>Residential</u>	<u>Non-residential</u>	12. <input type="checkbox"/> One family 13. <input type="checkbox"/> Two or more – <i>Enter number of units</i> → _____ 14. <input type="checkbox"/> Transient hotel, motel, or dormitory – <i>Enter number of units</i> → _____ 15. <input type="checkbox"/> Accessory Structure 16. <input type="checkbox"/> Swimming Pool 17. <input type="checkbox"/> Other – <i>Specify:</i> _____ _____ _____	18. <input type="checkbox"/> Assembly [A] 19. <input type="checkbox"/> Business [B] 20. <input type="checkbox"/> Educational [C] 21. <input type="checkbox"/> Factory [F] 22. <input type="checkbox"/> Institutional [I] 23. <input type="checkbox"/> Mercantile [M] 24. <input type="checkbox"/> Residential [R] 25. <input type="checkbox"/> Storage [S] 26. <input type="checkbox"/> Utility [U] 27. <input type="checkbox"/> High Hazard [H] 28. <input type="checkbox"/> UST-AST 29. <input type="checkbox"/> Other – <i>Specify</i> _____
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<b>B. OWNERSHIP</b> 8. <input type="checkbox"/> Private (individual, corporation, nonprofit institution, etc.) 9. <input type="checkbox"/> Public (Federal, State, or local government)					

<b>C. COST</b> 10. Cost of Improvement ..... \$ _____ To be installed but not includes in the above cost [a] Electrical ..... \$ _____ [b] Plumbing ..... \$ _____ [c] Heating, air conditioning ..... \$ _____ [d] Other (elevator, etc.) ..... \$ _____  11. TOTAL COST OF IMPROVEMENTS \$ _____	(Omit cents) Nonresidential _____ _____ _____ _____
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**III. SELECTED CHARACTERISTICS OF BUILDINGS – For new buildings and additions, complete Parts E – L; For demolition, complete only Part J, for all others skip to IV.**

<b>E. PRINCIPAL TYPE OF FRAME</b> 30. <input type="checkbox"/> Masonry (wall bearing) 31. <input type="checkbox"/> Wood frame 32. <input type="checkbox"/> Structural steel 33. <input type="checkbox"/> Reinforced concrete 34. <input type="checkbox"/> Other – <i>Specify</i> _____	<b>G. TYPE OF SEWAGE DISPOSAL</b> 40. <input type="checkbox"/> Public or private company 41. <input type="checkbox"/> Private (septic tank, etc.) <hr/> <b>H. TYPE OF WATER SUPPLY</b> 42. <input type="checkbox"/> Public or private company 43. <input type="checkbox"/> Private (septic tank, etc.)	<b>J. DIMENSIONS</b> 48. <input type="checkbox"/> Number of stories ..... _____ 49. <input type="checkbox"/> Total square feet of floor area, all floors, based on exterior dimensions ..... _____ 50. <input type="checkbox"/> Total land area, sq. ft. .... _____  <b>K. NUMBER OF OFF-STREET PARKING SPACES</b> 51. Enclosed ..... _____ 52. Outdoors ..... _____
<b>F. PRINCIPAL TYPE OF HEATING FUEL</b> 35. <input type="checkbox"/> Gas 36. <input type="checkbox"/> Oil 37. <input type="checkbox"/> Electricity 38. <input type="checkbox"/> Solar 39. <input type="checkbox"/> Other – <i>Specify</i> _____	<b>I. TYPE OF MECHANICAL</b> Will there be central air conditioning? 44. <input type="checkbox"/> Yes      45. <input type="checkbox"/> No  Will there be an elevator? 46. <input type="checkbox"/> Yes      47. <input type="checkbox"/> No	<b>L. RESIDENTIAL BUILDINGS ONLY</b> 53. Number of Bedrooms ..... _____ 54. Number of bathrooms Full ..... _____ Partial ..... _____

NO. \_\_\_\_\_ STREET \_\_\_\_\_

**NOTES AND DATA – (For Department Use)**

**IV. IDENTIFICATION – TO BE COMPLETED BY ALL APPLICANTS**

Name	Mailing Address - Number, Street, City, and State	ZIP Code	Tel. No..
Owner or Lessee			
Contractor		Builder's License No.	
Architect or Engineer			
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 authorized agent and we agree to conform to all applicable laws of this jurisdiction.			
Signature of Applicant		Address	Application Date

DO NOT WRITE BELOW THIS LINE

**V. PLAN REVIEW RECORD – FOR OFFICE USE**

Plans Review Required	Check	Plan Review Fee	Date Plans Started	By	Date Plans Approved	By	Notes
BUILDING		\$					
PLUMBING		\$					
MECHANICAL		\$					
ELECTRICAL		\$					
OTHER		\$					

**VI. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS**

Permit or Approval	Check	Date Obtained	#	By	Permit or Approval	Check	Date Obtained	#	By
BOILER (PA L&I)					DEMOLITION				
ROAD OCCUPANCY					PA DOT				
ELEVATOR (PA L&I)					SEWER – PUBLIC				
UTILITY					WT HISTORIC				
ZONING					WT CONSER.TRUST				
NPDES					BRANDYWINE CONS. TRUST				
S&E					NATIONAL LAND TRUST				
ACT 167					CC HEALTH DEPT.				

**VII. VALIDATION**

Building Permit Number: \_\_\_\_\_  
 Building Permit Issued: \_\_\_\_\_  
 Building Permit Fee: \$ \_\_\_\_\_  
 Certificate of Occupancy: \_\_\_\_\_  
 Plan Review Fee: \$ \_\_\_\_\_

Approved By: \_\_\_\_\_

FOR DEPARTMENT USE ONLY	
USE GROUP	_____
FIRE GRADING	_____
LIVE LOADING	_____
OCCUPANCY LOAD	_____

**VIII. ZONING PLAN EXAMINERS NOTES**

DISTRICT:

USE:

FRONT YARD:

SIDE YARD:

SIDE YARD:

REAR YARD:

OFF STREET PARKING REQ.:

PROVIDED:

SIGNS; NUMBER:

SIZE OF EACH SIGN:

**IX. PROJECT DOCUMENTS-OFFICE USE ONLY**

<b>TYPE DRAWING/REPORT</b>	<b>SUBMITTED</b>	<b>SIGNED AND SEALED</b>	<b>DATE</b>	<b>REVISION DATE</b>
<b>Site Plan</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Soil Report</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Architectural Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Structural Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Mechanical Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Electrical Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Job Specifications</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Structural Connect. Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Structural Calculations</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Special Inspection Data</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Sprinkler Drawings</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Sprinkler Calculations</b>	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO		

**X. DATA ENTRY****Application Received:****By:****Application Received:****By:****Data Entry:****By:**



*Board of Supervisors of Willistown Township  
Chester County*

688 Sugartown Road Malvern, PA 19355  
(610) 647-5300 Fax (610) 647-8156  
[www.willistown.pa.us](http://www.willistown.pa.us)

Dear Property Owner:

All property owners or their agents who obtain a building permit please be advised:

- Inspections are required during the period of construction with the FINAL INSPECTION FOR CERTIFICATE OF OCCUPANCY.
- It is a violation of the township's Building Code and Zoning Ordinance to occupy/use a building or portion of that building without a valid CERTIFICATE OF OCCUPANCY. Failure to arrange for a final inspection and Certificate of Occupancy can result in legal action against you for each day the violation remains in non-compliance.
- Unless the contractor/property owner notifies the building department that the work is ready for the required inspections, the building permit remains incomplete. This procedure is necessary to determine proper workmanship and to ensure that the building is safe for occupancy.

Property owners are being aware of these requirements. I have instituted this letter for your information; your protection and the satisfactory conclusion of your building permit process.

If you have any questions, please contact the Building Department at the Township.

Sincerely,

Ed Tiernan  
Building Code Official

ET/tms  
I have read the above information

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Property owner(s) signature(s)

**\*ALL names on deed must sign**



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

Date \_\_\_\_\_

## WILLISTOWN TWP ZONING PERMIT APPLICATION

Fee: \$100 (Residential) / \$150 (Non-Residential)

*Fee Due Upon Permit Submittal*

*Willistown Township*

*688 Sugartown Road Malvern, PA 19355*

*Phone 610.647.5300*

*Fax 610.647.8156*

Owner \_\_\_\_\_ Phone \_\_\_\_\_

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

Applicant \_\_\_\_\_ Phone \_\_\_\_\_

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

Property Address \_\_\_\_\_ Lot # \_\_\_\_\_

HOA Approval Yes / No

Conservation Easement Yes / No

Zoning District \_\_\_\_\_ Proposed Use \_\_\_\_\_

Building Area \_\_\_\_\_ sq.ft.

Project Set Backs (in feet): Front \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

Structure Height (ft) \_\_\_\_\_

**Request for the following:**

- |   |                     |
|---|---------------------|
| _____ Single Family Dwelling              | _____ Alteration    |
| _____ Addition                            | _____ Storage Shed  |
| _____ Commercial Building                 | _____ Swimming Pool |
| _____ Sign                                | _____ Wall          |
| _____ Change in use (Commercial use ONLY) | _____ Fence/Barrier |
|   | _____ Other         |

Project Description \_\_\_\_\_

\_\_\_\_\_

The applicant shall submit one copy of a site plan drawn to scale. See attached instructions. 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. If Homeowners Association (HOA) approval was required, a copy of their approval must be attached.

*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(s)** \_\_\_\_\_ / \_\_\_\_\_

**\*ALL names on deed must sign**

Please Print Name(s) \_\_\_\_\_

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

*Please do NOT write below this line*

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

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

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

# WILLISTOWN TOWNSHIP BUILDING AND IMPERVIOUS COVERAGE WORKSHEET

**\*\* MUST BE FILLED OUT FOR ALL PERMITS \*\***

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. **Total Limit of Disturbance (LOD):** \_\_\_\_\_ sq.ft.  
*Property where construction is to be completed*

**Building Coverage:**

*Calculated in square footage (footprint only)*

<u>Structures</u>	<u>Existing</u>	+	<u>Adding</u>	-	<u>Removing</u>	=	<u>Total</u>	
House/Additions	_____		_____		_____		_____	
Porch	_____		_____		_____		_____	
Garage	_____		_____		_____		_____	
Storage Buildings	_____		_____		_____		_____	
Other	_____		_____		_____		_____	
<b>Total</b>	_____		_____		_____			<b>A</b>

**Other Impervious Coverage:**

*Calculated in square footage (footprint only)*

<u>Areas</u>	<u>Existing</u>	+	<u>Adding</u>	-	<u>Removing</u>	=	<u>Total</u>	
Deck	_____		_____		_____		_____	
Patios	_____		_____		_____		_____	
Walkways	_____		_____		_____		_____	
Driveways	_____		_____		_____		_____	
Pool & Coping	_____		_____		_____		_____	
Other	_____		_____		_____		_____	
<b>Total</b>	_____		_____		_____			<b>B</b>

**Grand Total – all impervious coverage (sum A + 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*

**Total Building Coverage Percentage**

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

**Total Impervious Coverage Percentage**

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

# **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, 688 Sugartown Road, Malvern, PA 19355. An application requires a filing fee of \$100.00 Residential or \$150 Commercial 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.

### **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.

## **WILLISTOWN TOWNSHIP ZONING SITE PLAN REQUIREMENTS**

**The following must appear on all site plans:**

Location of all property lines, including length of lines and the property size in square feet.

Location of all existing buildings and improvements, including but not limited to:  
Residences, driveways, garages, decks, patios, porches, sheds, hot tubs, swimming pools and any other outbuildings.

Location of all building requires set-back lines.

Location of all proposed building requires set-back lines.

Exact dimensions, in square feet, of all existing and proposed improvements to the property.

Exact dimensions, in square feet, from all existing and proposed improvements to all property lines.

Location of all public streets and sidewalks abutting property.

Location of all easements on the property, both public and private, including the exact dimensions of all easements.

Location of the 100-year flood plain and the 100-year flood plain elevation, if applicable.  
Boundaries of the 100-year flood plain must be field staked prior to any construction, if applicable.

Location of an on-lot sewage system, if applicable.

Location of potable water well, if applicable.