Job Number: (for office use only)

Construction Permit Application

Use this application to obtain permits for a residential or commercial construction proposal and/or excavation projects.

Mechanical / Fuel Gas, Electrical, Plumbing, and Fire Suppression trade details are found on page 2.

	Mechanicai	/ Fuel Gas	, Electric	cal, Plumbing, ai	na Fire Sup	pression trade	details are	e lound on page	Z.	
Property Information Identify the location of work for the permit(s).			Parcel Address:							
If the activity will take place in a specific		1 s	Specific Location:							
building, tenant space, floor level, or suite, note that detail in the 'Specific Location' field. If applicable, list PR#.			☐ Check box if this application is part of a project and provide the project number: PR-20 -							
Ap	plicant Information		am the:	☐ Property Own	ner 🗆 Ter	nant □ Equ	uitable Owne	r 🗆 Licensed Pro	ofessional or Tradesp	erson
Identify how you are associated with the property.			Name: Company:							
Licensed professionals include design professionals, attorneys, and expediters. A tradesperson must have an active Philadelphia license for their trade or hold a PA Home Improvement Contractor Registration.		2	ddress:							
			Address:							
Pr	operty owner Information		he proper	rty owner is a/an:	☐ Individ	ual 🗆	Company*			
Identify the deeded property owner.			wner (1)	•	- IIIdivid	uai 🗆	Company			
If there was a recent change of ownership, documentation such as a deed or settlement sheet is required.								Check b	oox if new owner is be	ing listed
*If to ide nat inte suc info per	the property owner is a 'company', nitify the contact information for any ural person with more than 49% equity erest in the property. If no individual has than interest, provide contact ormation of at least two (2) natural sons with the largest equity interest in property.	3 0	wner (2) Name:	-						
De	sign Professional in	<u> </u>	lame:				Firm	:		
	sponsible Charge		PA License No.							
Identify the PA-licensed design professional who is legally		4 '	PA License No.: Phila. Commercial Activ		vity License No.:					
	responsible.		mail:				Phor	ne No.:		
D#4	right Sagna									
	pject Scope e this section to provide project	(a) Occi	upancy \square Si	ngle-Family	☐ Two-Fam	ily 🗆 Oth	ner, please describe):	
details; all fields are mandatory.		(b) Scop	pe of Work 🗆 Ne	ew Constructi	on □ Excavatio	on □ Ad	dition / Alteration	☐ Shell (No Fit Ou	
(a)	Choose the proposed occupancy of the entire building. If not one-or-two-family, provide a description of group(s) per code.	(,	h Disturbance		th Disturbance: _			for Commercial Pe	
(b)	Identify if the project will be new construction, an addition, interior/exterior alterations.	Ì				Area:	(Sq. Ft.)	Existing Altered	Area:	(Sq.Ft
	excavation or shell.	(e) Num	ber of Stories						
(c)	List the site area that will be disturbed by construction, if any. Enter 'zero' if no disturbance.	() Desc	cription of Work						
(d)	Note the new floor area created, including basements, cellars, and occupiable roofs. Where existing areas will be altered, list those areas separately.	5		ect Conditions		□ Green Roof Ir	ocluded	□ Initial Fit-out	of Newly Constructed	Snace
(e)	State the number of new or affected			lodular Construction		☐ Façade Work			cts Streets/Right-of-W	
(f)	stories. Provide a detailed description of the		□ IVI	loddiai Coristi delloi	I	□ Façade Work		, ,	o o	,
(f)	work proposed (use separate sheet if needed).		* Pr	rovide the associate	d Streets Re	view number for t	this project, if		cts Adjacent Property'	
(g)	Select all conditions that apply to this project (if any).			his project includes						
n R ** If	Provide the associated Streets Review umber if "Project Impacts Streets / tight-of-Way" is selected. 'Yes' is selected, an Owners'		•	Excavation or constr Structural alterations	ruction work wl s of a historic s	nere historic structu tructure (excluding	ure is within 90 one-or-two fa	0 feet on the same or amily dwelling).	nt building or structure. adjacent parcel.	
	cknowledgement of Receipt form nust be provided for each affected			Modifications to a pa Severing of structura				ons.		

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Job Number: (for office use only)

☐ Fire Suppression

Project Details, Other Permits (a) Check all that apply: & Contractor Information □ Building ☐ Excavation ☐ Mechanical & Fuel Gas □ Electrical ☐ Plumbing Use this section to provide project details, pre-requisite approvals and applicable contractor information. Provide the associated Construction Permit number, if applicable: RP or CP - 20 Choose all disciplines of work for which permits are being requested. · If 'Building' is not requested, provide the number of the associated permit that was previously issued (where applicable). • If a Zoning Permit was issued for this work, provide the related Zoning Permit number. Identify the general contractor and estimated cost of building construction. Identify the licensed excavation contractor and estimated cost of excavation work. Identify the mechanical contractor. estimated cost of mechanical work, equipment type, and quantity as: • Number of registers/diffusers (separate new / relocated) · Number of appliances • Number of Type I / Type II kitchen hoods Where fuel gas work is included, note the estimated cost of fuel gas 6 Identify the licensed electrical contractor, estimated cost of electrical work, and a registered third-party electrical inspection agency.

work, number of fixtures, and check location of work as:

Interior

• Exterior Drainage and/or Water Distribution

Identify the registered master plumber, estimated cost of plumbing

(g) Identify the licensed fire suppression contractor, estimated cost of fire suppression work, and number of devices

- Sprinkler Heads (separate new / relocated quantities)
- Standpipes
- Fire Pumps
- Stand-alone Backflow Prevention Devices
- · Kitchen Extinguishing Systems
- Hydrants

*ROUGH-IN NOTICE: If you are seeking a rough-in permit, an application for plan review must be submitted already.

Provide the total improvement cost for residential (including multi-family) alterations and additions. Check the box if your project is excluded from real estate tax exemption and exempt from Development Impact Tax

ا ما	Consul Building Construction Contractor Information				
b)	· · · · · · · · · · · · · · · · · · ·	On at of Divilation World			
	Name:	Cost of Building Work: \$			
	License Number:	Phone:			
(c)	Excavation Work & Contractor Information				
	Name:	Cost of Excavation Work: \$			
	License Number:	Phone:			
(d)	Mechanical / Fuel Gas Work & Contractor Information				
	Name:	Cost of Mechanical Work: \$			
	License Number:	Cost of Fuel Gas Work: \$			
	Equipment Types: \square Registers / Diffusers \square Appliances \square Hoods	Phone:			
	Equipment Details & Quantities:				
(e)	Electrical Work & Contractor Information New Ins	stallation ☐ Alteration ☐ *Rough-In			
	A.I.				
	Name:	Cost of Electrical Work: \$			
	License Number:	Phone:			
		Phone:			
f)	License Number: Third Party Inspection Agency Name:	Phone:			
f)	License Number: Third Party Inspection Agency Name: Plumbing Work & Contractor Information	Phone:stallation			
f)	License Number: Third Party Inspection Agency Name: Plumbing Work & Contractor Information	Phone:			
f)	License Number: Third Party Inspection Agency Name: Plumbing Work & Contractor Information	Phone:			
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	License Number: Third Party Inspection Agency Name: Plumbing Work & Contractor Information	Phone:			
	License Number: Third Party Inspection Agency Name: Plumbing Work & Contractor Information	Phone:			
(f) (g)	License Number:	Phone:			

Declaration & Signature

All provisions of the Philadelphia Code and other City ordinances will be complied with, whether specified herein or not. Plans approved by the Department form a part of this application. I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I further certify that I am authorized by the ownerto make the foregoing application, and that, before I accept my permit for which this application is made, the owner shall be made aware of all conditions of the permit. I understand that if I knowingly make any false statements herein, I am subject to such penalties as may be prescribed by law or ordinance, inclusive of the penalties contained in 18 Pa. C.S. § 4904.

Applicant Signature:	Date:	1	1

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