



Lower Providence Township
 100 Parklane Drive • Eagleville, PA. 19403
 Phone: (610) 539-8020 • Fax: (610) 539-6347
 www.lowerprovidence.org

ACCESSIBILITY PERMIT APPLICATION

PERMIT NO.:
DATE:

Owner: _____
Address: _____

Contractors Registration No.: _____
Contractors/Applicant Name: _____
Contractors Address: _____

Owner Phone No.: _____
Owner Cell No.: _____

Contractors Phone No.: _____
Contractors Cell No.: _____

Location of Work: _____
Type of Building: Commercial Industrial
Used As: _____

Type of Work: (check one) New Addition Alteration Repair Other

Total Square Footage: _____

Description of Work: _____

Total Cost of Work:	_____
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Applicable Codes:

- PA Uniform Construction Code	
- 2009 International Building Code (IBC) Chapter 11 Accessibility and Appendix E	
- ICC/ANSI A117.1-2003 Accessible and Usable Building and Facilities	
Accessibility Permit Fees	
PA UCC Surcharge Fee	\$4.00
Total Fees	

Please call Lower Providence Township at (610)-539-2642 to schedule an inspection. Forty-eight (48) Hours Notice is required. By signing this application the contractor/Applicant certifies that all information given is correct and the property owner has authorized work. All work is to comply with 2006 ICC Codes. All work must be started within 6 months and completed within 1 year. Application is hereby made for a permit to install or alter any mechanical service and or systems and or heating systems on the premises described above. The information, which above, together with the mechanical plan and or heating plan, is made part of this application. By the undersigned, it is understood and agreed by this application that any error, misstatement or misrepresentation of material fact as contained in this application without approval of Lower Providence Township shall constitute sufficient ground for revocation of this permit and or prosecution or both.

 Contractor

 Date