

COUNTER CHECKLIST FOR SINGLE FAMILY RESIDENCE

PART 1 – APPLICATION (PLEASE HAVE EVERYTHING FILLED OUT COMPLETELY ON APPLICATION)		PART 2 – PLANS & PAPERWORK (PAPERWORK MUST BE SUBMITTED IN THIS ORDER, HAVE COPIES MADE)	
	Date		Subcontractor Permits (A/C, Elec., Plumb, Insul)*
	Permit # and Conf #		If private provider must have: Notice to building official, Plans Compliance Affidavit and list of licenses of inspectors/examiners. Stamp application- **PRIVATE PROVIDER**
	Property Address		2 Copies of Elevation Sheet
	Section, Block & Lot #		2 Copies Manual J
	Tax Folio (Parcel ID)		2 Copies Energy Codes filled out and Signed (2 areas front page and display page)
	Engineering (RP) # in upper right hand corner of application		2 Complete Sets Engineering Approvals (if applicable, Health dept. & abandonment of easements paperwork) (red copy must be submitted unless it's a re-submittal)
	Owner's Name, Address & Tel #		2 Copies Well Permit & Septic Permit (if applicable)
	Contr./HOB Name, Addr., Tel # , Fax #, e-mail address		2 Sealed Plot Plan Surveys (w/house)
	Architect/Eng name, Addr, Tel #, State Lic #		2 Copies Recorded Notice of Commencement*
	Lender Name & Address		2 Copies Signed & Notarized Property Owner Affidavit or Homeowner Builder Affidavit
	Class of Work		2 Copies of Warranty Deed (HOB only)
	Description of Work: list bedrooms, bath, gar.		Misc. paperwork (SLW Utility Receipt, State lic, Gen. Liability, Workers comp if not registered w/ City of Psl)
	Valuation of Work		2 Stamped Plans from Health Dept. (only for Well & Septic Permits)
	Square Footage Living/ Nonliving		1 Set of Sealed Truss Shop Drawings on 8 1/2" x 11" paper (stapled)
	Occupancy Type		2 Copies of Truss Layout from Truss Company/ Appr. & Signed by Engin/Arch who sealed the Plans
	Total Sq Footage		2 Sets of Signed and Sealed Plans w/Product Approval and Windload Form superimposed onto Plans**
	Type of Construction		
	# of Stories		
	Plan Review Fee		
	Received by and Date		**Plan sets must be Complete. No Loose Plan Sheets are Allowed
	City Water/Sewer or Well & Septic		*Some items maybe obtained prior
	Contr. Comp #, State Lic # and Exp. Date		
	Ins. & Workers Comp (if state Lic)		All items shall be verified before permit is issued
	Notarized Signature of Contr/HOB		

This Checklist is for Building Dept. Use Only, Additional Documents May Be Req. Any Exceptions To The Above Must Be Approved On An Individual Basis By A Supervisor. No General Exceptions Are Allowed.

SFR updated 07/13/2005tjv

