

township of

Phone: 215-348-9915 • Fax: 215-348-8729  
 Website: www.doylestownpa.org



doylestown

425 Wells Road • Doylestown, PA 18901

(Please check one)

**PLUMBING** or  **SPRINKLER PERMIT APPLICATION**

Owner: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Owner Phone No: \_\_\_\_\_  
 Owner Cell No: \_\_\_\_\_

Contractor State Registration No: \_\_\_\_\_  
 Contractor Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Contractor Email: \_\_\_\_\_  
 Contractor Cell No: \_\_\_\_\_

Location of Work: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Type of Building (check one):  Residential  Non-Residential

Used as: \_\_\_\_\_

ENCLOSE 2 COPIES OF PLANS/SPECIFICATIONS

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

<b>(Required)</b>	
<b>Total Cost of Work:</b>	<b>\$</b>

Type:	Quantity:	Fees:
Baseboard		
Bath		
Dishwashing Machine		
Drinking Fountain		
Fire Pump / Sprinkler System		
Floor Drain		
Garbage Grinder		
Grease Trap		
Humidifier		
Ice Maker		
Tank and Heater / Solar Heater		
Toilet/Urinal		
Sewage Ejector/ Sump Pump		
Shower		
Sink/ Lavatory		
Washing Machine		
Water Supply Connection		
Miscellaneous Fixture		
<b>Total Fixtures and Fee:</b> (Twp. use only)		
<b>PA UCC Surcharge Fee:</b>	<b>\$4.50</b>	
<b>Total Fees:</b>	(Twp. use only)	

By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and Township inspection of that work. All work to comply with the PA UCC as amended. Please call Doylestown Township at 215-348-9915 to schedule inspections at least 24 hours in advance.

**PLEASE NOTE: The property owner(s) must sign this application to verify the contractor or tenant has permission from the property owner(s) to do all construction work authorized by the issuance of this permit. Two copies of a site plan with two copies of the appropriate construction documents must accompany this application. In addition, an indexed PDF disc must be included for all new subdivision or amended site plans.**

**All contractors are to supply a certificate of insurance providing evidence of statutory Workers Compensation Insurance and Commercial General Liability Insurance with a minimum limit of \$1,000,000 per occurrence. Doylestown Township, its elected and appointed officials, and employees shall be named additional insured under the contractor's General Liability Insurance policy.**

By signing this application, authorization is granted to any municipal representatives of Doylestown Township to access the above property as stated within this application and attached sub-trade permit application at any time, without an administrative warrant, to inspect and verify that any proposed use and/or structure contained within this application and/or that exists on the above property complies with all Doylestown Township zoning and building code ordinances.

The application together with the site plan and construction documents is made a part of this application by the undersigned. Furthermore, it is clearly understood and agreed to by the applicant and property owner that the Township office is not responsible for any property dimensions shown on the site plan and establishment of property lines is the sole responsibility of the property owner and applicant. The applicant and property owner also agree they are responsible for the replacement to Township standards of any Township road or infrastructure which is damaged during the building of the permitted structure and understands that the information provided on this application by the applicant(s) and property owner(s) is true and correct to the best of their knowledge or belief, and all information contained in their application becomes part of the public record. The applicant warrants the truthfulness of the information in the application, and that if any of the information provided is incorrect, the permit may be revoked. Furthermore, the application and permit can provide that if the permit is issued wrongfully, whether based on misinformation or an improper application of the code, the permit and certificate of occupancy may be revoked.

**Written approval of final inspections will be required from all other agencies issuing permits for this project before a Certificate of Occupancy can be issued.**

**By signing this application, the applicant certifies that all the information is correct and that the property owner has authorized work and inspection of that work. All work to comply with the PA UCC as amended.**

Date: \_\_\_\_\_ Signature of Applicant(s): \_\_\_\_\_  
 Print Applicant(s) Name(s): \_\_\_\_\_

Date: \_\_\_\_\_ Signature of Property Owner(s): \_\_\_\_\_ **(Required)**  
 Print Property Owner(s) Name(s): \_\_\_\_\_ **(Required)**

**FOR DETAILS OF THE GREEN POINTS INITIATIVE SEE THE TWP. WEBSITE AT:**  
[www.doylestownpa.org/departments-and-services/code-and-zoning](http://www.doylestownpa.org/departments-and-services/code-and-zoning) Under "Permit Applications and Guidelines"

**REQUIRED: Does the applicant intend to apply for a Green Points Initiative Rebate BEFORE final inspection of this project? (You must check one)  YES  NO**