

TOWNSHIP OF FINDLAY APPLICATION FOR <u>RESIDENTIAL</u> BUILDING PERMIT

Permit # 24-09
Date Issued 1/8/39

Please Print or Type. Make sure information transfers to all four capies. Incomplete information may cause a delay to	the processing of this application.
Permit is for: (Check One)	
NEW DWELLING: SINGLE FAMILY DUPLEX TOWNHOUSE MA	
Addition Alteration Deck In-Ground pool Above Ground Pool Upper Demolition Plumbing Mechanical Electrical Other Plumbing Mechanical Electrical Other Plumbing Mechanical Electrical Other Plumbing Mechanical Electrical Other Plumbing Plumbing Mechanical Electrical Other Plumbing _	Julity/Misc. Use Structure
Demontion Flumbing Mechanical Electrical Outer	
BUILDING LOCATION: Plan Name THE ABBEY	101# 115
Address: 402 SAINT FAUSTINA ST.	Lot
County Tax ID # 1319-L- San Ryan Builders Name of Owner Phone	and the state of t
Name of Owner Phone	E-Mail
Owner's Address: 4000 Town Center Bivo.	
Name of Contractor: Suite 200 Jobsite contact name:	
112 919 90 11	Aail
Contractor's Address:	Phone #
Architect/Engineer: (if applicable)	
DESCRIPTION OF PROPOSED CONSTRUCTION: ESTIMATED COST OF CONST. S 22 4, 32 3 SQUARE FOOTAGE OF PROPOSED NUMBER OF STORIES 2 MAXIMUM HEIGHT ABOVE GRADE 27 BUILDING DIMENSIONS Front 34' Rear 34' Depth 36.33' CRAWLSPACE? BASEMENT? Full Partial Finished Unfinished	249(J/9 ext:
ESTIMATED COST OF CONST. S 224.323 SQUARE FOOTAGE OF PROPOSED	CONST. 1996 ATT
NUMBER OF STORIES 2 MAXIMUM HEIGHT ABOVE GRADE 27	and pools
BUILDING DIMENSIONS Front 34 Rear 34 Depth 36.33 CRAWLSPACE? BASEMENT? Full Partial Finished Unfinished	
FOOTER: 1. CONCRETE Dimensions (width) x (thickness)	
Rebar* (Rod size & placement) 2. CRUSHED STONE (For pre-casi concrete panels) Dimensions (width)x (thickness)	The state of the s
3. OTHER:	
FOUNDATION WALLS: 1. CONCRETE BLOCK Size- Total Wall Height (top of footer t	o sill plate)
Rehar' (Rod size & placement)	o sii piate)
2. POURED-IN-PLACE CONCRETE:	
Wall Thickness Total Wall Height (top of footer t Rebar ⁹ (Rod size & placement)	o sill plate)
3. PRECAST CONCRETE PANELS (Manufacturer)	
Wall Thickness Total Wall Height (top of footer t	o sill plate)
4. OTHER:	The second secon
PRINCIPLE FRAMING SYSTEM: 1. WOOD: Conventional Stick Frame Timber Frame Panelized Panelized	Modular
- COLD FORLAND CERTIFICATION	
3. REINFORCED CONCRETE (or) UNIT MASONRY	
4. OTHER	
ROOF FRAMING: 1. Conventional Stick Frame	
Type of Roof Rooting Material UTILITIES:	
1. HEAT: Natural Gas Propane Oil Electric Ai	r Conditioning (ves/no) VSS
2. WATER: Public Water Supply Well Cistern	
3. SEWAGE: Public Sewage System On-lot private system	
NOTE: CONTACT ALLEGHENY COUNTY HEALTH DEP'T. ON-LOT SEWAGE DISPOSAL PR	
LOT PRIVATE SEWAGE SYSTEM PERMIT THE PERMIT MUST BE SECURED FROM ALLEC ISSUANCE OF A BUILDING PERMIT BY FINDLAY TWP.	THEN T COUNTY PRIOR TO THE
(A) (A) (A) A simulation of the constant of th	
METHOD OF DISPOSAL FOR CONSTRUCTION DEBRIS:	
FOR DEMOLITION ONLY:	
Number & Description of Bldg's to be demolished:	
All Building Permits shall commence within six (6) months from the date of issuance. A separate Plum	shing Parent is also required Plance
contact the Plumbing Inspector at (724)-695-0500 prior to performing any plumbing work. A Highw	
Department of Transportation is required when applicable	ay vecupancy verms non-size in-
The applicant hereby agreed to comply with the provisions of all laws and ordinances regulating huilding constructi	og in the Township of Findley
LR454/18/20 12/18/23 VAN /	YAN DUILDERS
Signature of Applicant Date Printed Name of	Applicant
OFFICIAL USE ONLY: (2/0) PAID FEES: BUILDIN	C DEDMIT 499.00
OFFICIAL USE ONLY: ZONING APPROVED YES PAID FEES: BUILDIN	ZONING 25.00
	CCUPANCY 25 00
OCCUPANCY APPLICATION FILED YES NO	UCC FEE \$4.50
SEWAGE FEE PAID S 5470 CH. # 3688	TOTAL: \$ 533-50
WATER FEES PAID \$ 3610.00 CH. # 3689	
	1111111
IMPER L	
TOWNSHIP APPROVAL	Date: /2/19