

TOWNSHIP OF DOYLESTOWN

425 WELLS ROAD
DOYLESTOWN, PA. 18901
PHONE (215) 348-9915

DEPT. FILE COPY

ZONING/CONSTRUCTION PERMIT

PROPERTY NO: 669 STREET: SHADY RETREAT ROAD
OWNER/ADDRESS: OWNER PHONE

SMITH, JOHN W., IV + SARAH H.
669 SHADY RETREAT ROAD

DOYLESTOWN PA 18901 LOT SIZE /1
SUBDIVISION/LOT STORE #
VICTORIAN GARDENS

APPLICANT
PHONE SMITH, JOHN W., IV + SARAH H.
669 SHADY RETREAT ROAD
DOYLESTOWN PA 18901
CONTRACTOR PHONE

THE APPLICANT, AS GENERAL CONTRACTOR AND SUBCONTRACTORS ARE HEREBY GRANTED PERMISSION TO PERFORM THE FOLLOWING:

BUILDING CONTRACTOR NAME / ADDRESS CONTRACTOR PHONE
JOHN W. SMITH

EST. COST 51,000.00 SQUARE FEET
NO. UNITS 1

PLUMBING ADDIT.-RESID. MODEL: COMMENTS
SUBCONTRACTOR NAME / ADDRESS PHONE NO.

REG. #: BOCA BUILDING CLASSIFICATION

PERMIT NO. : 4091
ISSUE DATE : 4/05/2004
TMP 09-047-153
ZONING CLASS :
RECEIPT NO. : 24489
RECEIPT DATE : 4/02/2004

FEES

BLDG. : 500.00
PLUMBING : 0.00
MECHANICAL : 0.00
ROAD OCCU. : 0.00
ZONING/OTHER : 0.00

USE/OCCU : 0.00

TOTAL FEE →

500.00

BOCA BUILDING CLASSIFICATION

TYPE :
USE GROUP :

NO. FIXTURES
PUBLIC WATER
PUBLIC SEWER

SEWER LATERAL DATE: PHONE NO.

MECHANICAL SUBCONTRACTOR NAME / ADDRESS PHONE NO.

REG. #: ROAD OCCUPANCY SUBCONTRACTOR NAME / ADDRESS PHONE NO.

ZONING/OTHER SUBCONTRACTOR NAME / ADDRESS PHONE NO.

REG. #:

Final Code Inspection OK 12-15-04 Sbc

OTHER REMARKS

RMS. CONDITIONS, & INSPECTION REQUIREMENTS ON REVERSE SIDE.

ISSUING OFFICER
ROBERT A. GANETTY

\$ 500.00
\$ 500.00

RECEIVED

MAR - 9 2004

APPLICATION FOR
PLAN EXAMINATION AND
BUILDING PERMIT

IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, and IX.

I. LOCATION OF BUILDING

AT (LOCATION) 669 W. S Hardy Retreat Rd. (STREET) ZONING DISTRICT 18901

BETWEEN Mahogany Ct. (CROSS STREET) AND N. S Hardy Retreat Rd. (CROSS STREET)

SUBDIVISION Victoria Gardens LOT 1 BLOCK 1 LOT SIZE 11,995.80

II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT

1 New building

2 Addition (If residential, enter number of new housing units added, if any, in Part D, 13)

3 Alteration (See 2 above)

4 Repair, replacement

5 Wrecking (If multifamily residential, enter number of units in building in Part D, 13)

6 Moving (relocation)

7 Foundation only

B. OWNERSHIP

8 Private (individual, corporation, nonprofit institution, etc.)

9 Public (Federal, State, or local government)

C. COST

10. Cost of improvement..... \$ 42,000.00

To be installed but not included in the above cost

a. Electrical..... \$ 3,000.00

b. Plumbing..... \$ 2,500.00

c. Heating, air conditioning..... \$ 3,700.00

d. Other (elevator, etc.)..... \$

11. TOTAL COST OF IMPROVEMENT \$

D. PROPOSED USE - For "Wrecking" most recent use

Residential

12 One family

13 Two or more family - Enter number of units - - - - -

14 Transient hotel, motel, or dormitory - Enter number of units - - - - -

15 Garage

16 Carport

17 Other - Specify _____

Nonresidential

18 Amusement, recreational

19 Church, other religious

20 Industrial

21 Parking garage

22 Service station, repair garage

23 Hospital, institutional

24 Office, bank, professional

25 Public utility

26 School, library, other educational

27 Stores, mercantile

28 Tanks, towers

29 Other - Specify _____

Nonresidential - Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building at industrial plant. If use of existing building is being changed, enter proposed use.

III. SELECTED CHARACTERISTICS OF BUILDING - For new buildings and additions, complete Parts E - L; for wrecking, complete only Part J, for all others skip to IV.

E. PRINCIPAL TYPE OF FRAME

30 Masonry (wall bearing)

31 Wood frame

32 Structural steel

33 Reinforced concrete

34 Other - Specify _____

G. TYPE OF SEWAGE DISPOSAL

40 Public or private company

41 Private (septic tank, etc.)

H. TYPE OF WATER SUPPLY

42 Public or private company

43 Private (well, cistern)

F. PRINCIPAL TYPE OF HEATING FUEL

35 Gas

36 Oil

37 Electricity

38 Coal

39 Other - Specify Propane

I. TYPE OF MECHANICAL

Will there be central air conditioning? None

44 Yes No

45 Yes No

Will there be an elevator? Yes No

46 Yes No

47 Yes No

J. DIMENSIONS

48. Number of stories..... 2

49. Total square feet of floor area, all floors, based on exterior dimensions..... 1,497 sq ft Living space Garage 575

50. Total land area, sq. ft..... 894 sq ft

K. NUMBER OF OFF-STREET PARKING SPACES

51. Enclosed.....

52. Outdoors.....

L. RESIDENTIAL BUILDINGS ONLY

53. Number of bedrooms.....

54. Number of bathrooms.....

Full..... 1

Partial..... 1



4091

BUILDING FEES DUE

DATE: 4-2-04 TAX PARCEL # _____
 ADDRESS: 669 Shady Retreat Rd LOT: _____
 DEVELOPMENT: _____ TYPE OF CONSTRUCTION BAR

ZONING:\$ _____
 BUILDING:\$ 508.00
 ACT 222:\$ _____
 MECHANICAL:\$ _____
 PLUMBING.....\$ _____
 (INCLUDES SEWER LATERAL)
 ROAD OCCUPANCY.....\$ _____
 WELL.....\$ _____

TOTAL \$ 508.00
 CODE COMPLIANCE ESCROW.....\$ 500.00 (Finance 12-16-04)
 MISC. _____\$ _____

COMMENTS: _____

MUNICIPAL AUTHORITY FEES

CONSTRUCTION WATER:\$ _____
 MISC: _____\$ _____

BANK TRANSIT NO.	\$ CHECKS	\$ CASH	NET	DATE	NAME	DESCRIPTION	RECEIVED BY
3411	508.00		508.00	4/1/04	John Smith	Construction building permit	PS

TOTAL \$ _____
 ADDRESS: 669 N. Shady Retreat Rd.
 CITY: Doylestown STATE: PA ZIP: 1701
 T 24489

TOWNSHIP OF DOYLESTOWN
 425 WELLS ROAD
 DOYLESTOWN, PA. 18901
 215-348-9915

FOR Code Enforcement
 building permit
669 N. Shady Retreat Rd.

RETAIN THIS RECEIPT
 FOR YOUR RECORDS

Thank You

INVALID WITHOUT SIGNATURE

RECEIVED BY



RELEASE OF CODE COMPLIANCE ESCROW DEPOSIT

TO: FINANCE OFFICE

FROM: Steve Walther

NAME: John W. Smith
ADDRESS: 669 N. Shady Retreat Rd.
CITY: Doylestown, Pa. 18901
RECEIPT # TE 2504

12-15-04

A certificate of occupancy was issued on ~~12-15-04~~ and a refund of \$500.00 may be forwarded to the applicant named above.

BANK TRANSIT NO.	\$ CHECKS	\$ CASH	NET	DATE	NAME	DESCRIPTION	RECEIVED BY
3410	500.00			12/15/04	John Smith	Construction compl. escrow	[Signature]

ADDRESS: 669 N. Shady Retreat Rd.
 CITY: Doylestown PA 18901

INVALID WITHOUT SIGNATURE

TE 2504

TOWNSHIP OF DOYLESTOWN
 ESCROW FUND
 425 WELLS ROAD
 DOYLESTOWN, PA 18901
 (215) 348-9915

FOR Code Compliance Escrow

669 N Shady Retreat Rd

RETAIN THIS RECEIPT FOR YOUR RECORDS

Thank You

RECEIVED BY [Signature]

(Finance 12-15-04)



doylestown

425 Wade Rd. • Doylestown, PA 19501

INSPECTION RECORD

DATE

4-2-04

ADDRESS

669 Shady Retreat RD

DEVELOPMENT

BAR

TYPE OF CONSTRUCTION

TYPE OF INSPECTION

FOOTING

4-19-04 OK Fail

SEWER AND WATER

ROUGH FRAMING

OK 8-23-04, S. Walther

ROUGH PLUMBING

OK 8-23-04, S. Walther

ROUGH ELECTRICAL

UNITED INSPECTIONS 8-12-04 (STICKER)

MISCELLANEOUS

FINAL

OK 12-15-04, S. Walther

FINAL ELECTRICAL

UNITED INSPECTION 12-14-04

CORRECTION ACTION

DATE

TYPE OF CORRECTION



United Inspection Agency, Inc.
180 S. Main St. - Ambler, PA 19002

Duplicate Electrical Approval

Municipal Confirmation Only - Not A Utility Cut-In

Job No. J-33200 Owner/Builder:

Location 669 Shady Retreat Rd

Installation Consisting of: Final electrical inspection of addition wiring

PA

United Inspection Agency, Inc.

80 S. Main St. - Ambler, PA 19002

Duplicate Electrical Approval

Municipal Confirmation Only - Not A Utility Cut-In

Owner/Builder:

Retreat Rd

PA

Consisting of: Final electrical inspection of addition wiring

Contractor: Albert Janik

Final Appr. Date: 12/14/2004

11:45 AM

Doylestown Township

Inspector: Ben Colletti

000376

Janik

2004

Final Appr: 12/14/2004

11:45 AM

ID

Inspector: Ben Colletti

Ben Colletti

000376

The condition following govern the issuance of this certificate, and any certificate previously issued is annulled. This certificate only covers the electrical equipment and installation conditions as of date. Upon the introduction of additional equipment or alterations, application shall be promptly made for inspection. Inspectors of this Company shall have the privilege of making inspections at any time, and if the rules are violated, the Company shall have the right to revoke this certificate.

The condition following govern the issuance of this certificate, and any certificate previously issued is annulled. This certificate only covers the electrical equipment and installation conditions as of date. Upon the introduction of additional equipment or alterations, application shall be promptly made for inspection. Inspectors of this Company shall have the privilege of making inspections at any time, and if the rules are violated, the Company shall have the right to revoke this certificate.



**CONTRACTORS
WORKERS COMPENSATION INSURANCE COVERAGE
INFORMATION
(ATTACH TO BUILDING PERMIT APPLICATION)**

A. The applicant is _____

A contractor within the meaning of the Pennsylvania Workers Compensation law. Yes No

If the answer is "yes", complete sections B and C below

B. Insurance Information

Name Of Applicant _____

Federal Or State Employer Identification Number _____

Applicant is a qualified self-insurer for workers' compensation Certificate Attached _____

Name Of Workers Compensation Insurer _____

Workers Compensation Insurance Policy No. _____
Certificate Attached _____

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated.

____ Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Township.

____ Religious exemption under the workers' compensation law

Subscribed and sworn to before me this _____

_____ day of _____ 19 _____

Ann M. Smith
Signature of Applicant

Address

(Signature of Notary Public) _____

County of _____

Municipality of _____

My commission expires: _____

IV. IDENTIFICATION - To be completed by all applicants

Name		Mailing address - Number, street, city, and State		ZIP code	Tel. No.
John W. Smith		669 N. S. Hardy Retreat Rd. Doylestown PA.		18901	215 230 3828
Contractor		Same as Above		Builder's License No.	
Architect or Engineer					

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

Signature of applicant: John W. Smith Address: _____ Application date: 4-2-04

DO NOT WRITE BELOW THIS LINE

V. PLAN REVIEW RECORD - For office use

Plans Review Required	Check	Plan Review Fee	Date Plans Started	By	Date Plans Approved	By	Notes
BUILDING		\$					
PLUMBING		\$					
MECHANICAL		\$					
ELECTRICAL		\$					
OTHER		\$					

VI. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS

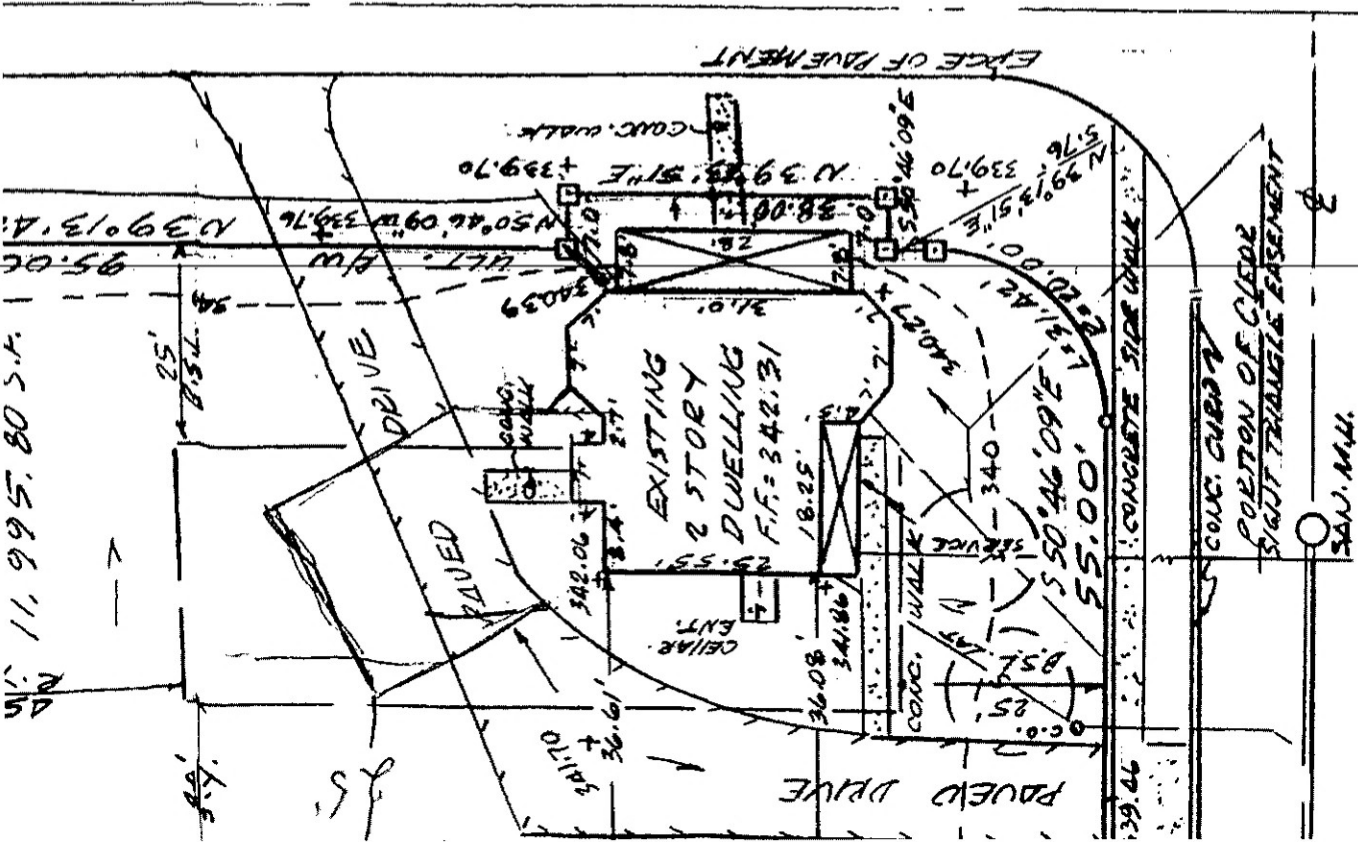
Permit or Approval	Check	Date Obtained	Number	By	Permit or Approval	Check	Date Obtained	Number	By
BOILER					PLUMBING				
CURB OR SIDEWALK CUT					ROOFING				
ELEVATOR					SEWER				
ELECTRICAL					SIGN OR BILLBOARD				
FURNACE					STREET GRADES				
GRADING					USE OF PUBLIC AREAS				
OIL BURNER					WRECKING				
OTHER					OTHER				

VII. VALIDATION

Building Permit number	_____	FOR DEPARTMENT USE ONLY	
Building Permit issued	_____	Use Group	_____
Building Permit Fee \$	_____	Fire Grading	_____
Certificate of Occupancy \$	_____	Live Loading	_____
Drain Tile \$	_____	Occupancy Load	_____
Plan Review Fee \$	_____	Approved by:	<u>[Signature]</u>
		TITLE	_____

RETREAT

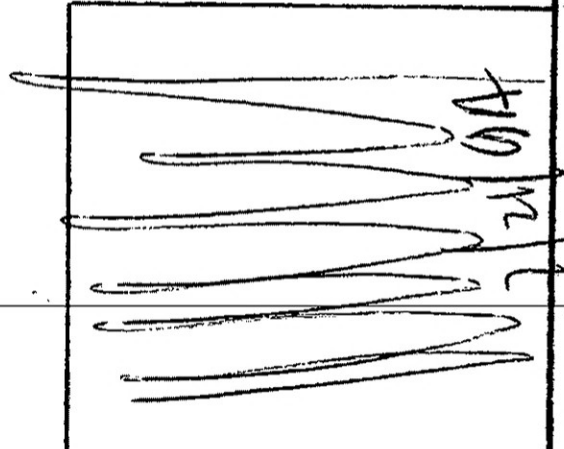
SHADY



OGAN Y (SO'LOW.) COURT

URVEY
 BARRENS
 TOWNSHIP,
 PA.
 FOR
 A GROUP
 STREET
 PA.

JOB NO.	0801
SCALE:	1" = 30'
DRAWN BY:	STAFF
CHECK'D BY:	M.W.L.
DATE	7/21/94
SHEET NO.	1 OF 1



Total Lot Area = 11,995.8
 Unrestricted Lot Area = 11,995
 (Total Area Less Easement Area)

IMPERVIOUS AREA COMPUTATIONS

Maximum Lot Coverage = 35%
 = 4,198.555 Permitted

EXISTING Dwelling = 1,401.6
 Driveway = 1,507.6
 Walks/Patios = 181.0
 Total EXISTING = 3,161.6
 Total Remaining Permitted = 26.36
 Impervious Area = 1,036.91
 = 8.64%

LEGEND

o 339.44 EXISTING Spot Elevator
 -o- High Point (Grade Bre
 341.70 Street Tree

---340--- Existing Contour
 - - - - - EXISTING Slope Direc

F.P. = 342.3 Elev. EXISTING Finish

Heritage Surveyors
 & Engineers Inc.
 573 North Main St.
 Suite 208-210
 Doylestown, PA
 18901
 (215) 348-7735