



Zoning Certification, Building Permit & Occupancy Permit Application Form 2

General

Applicant (Company) Name: _____

Contact Person: _____

Project Title/Name/Address: _____

Town Assigned Project Review Application Number (from Form 1): _____

List other application form(s) submitted for this project with approval dates:

Form _____	Date Approved _____

Estimated cost of Construction \$ _____

Payment amount, required at time of Application (Form 2) Submittal: \$ _____

Refer to Fee Schedule in Chapter 128, Town of Bridgeville Code. Payment amount is from total in following table.

Permit Fee Item	Required Fee	Amount of Payment
Building Permit Cost (% of Est. Cost.)		
Connection Fee		
Sewer Inspection		
Sewer Impact Fee		
Water Impact Fee		
Meter Pit		
Water Tapping		
Water Meter		
Library Fund		
Fire/EM Fund		
EM #2		
C/O		
Zoning		
Delinquent Charges (Clean Hands Policy)		
TOTAL		

Date Form 2 Received by Town: _____

Received by: _____

Zoning Certification

Was a variance(s) requested? _____ For: _____
(Yes or No)

If yes, include approved Application Form 4 with this application.

Was a conditional use approval required? _____ For: _____
(Yes or No)

If yes, include approved Application Form 4 with this application.

Applicant must provide a plan of the site showing the size and location of the proposed construction, as well as any existing building or structures. Plan must include location of sewer and water connections, septic tanks, wells, parking, and other utilities.

- Type of Improvement
- _____ New Building
 - _____ Sq. Feet New
 - _____ Addition to Building
 - _____ Sq. Feet Existing Building
 - _____ Sq. Feet Added to Building
 - _____ Alteration
 - _____ Percentage of Building Altered
 - _____ Full Building Demolition
 - _____ Sq. Feet Building
 - _____ Partial Build Demolition
 - _____ Sq. Feet Existing Building
 - _____ Sq. Feet to be demolished
 - _____ Sewer Connection (provide location sketch)
 - _____ Water Connection (provide location sketch)
 - _____ + Sign Request (must comply with Ch. 234-Art. 18)
 - _____ Residential
 - _____ Non-residential
 - _____ Off-Premises Sign
 - _____ Exempt
- Sign Type
- _____ Freestanding
 - _____ Wall
 - _____ Entrance of Developments
 - _____ Entrance of Public Facilities
& Places of Assembly
 - _____ Other _____

+ Sign request must include the information that is necessary for Town review to verify compliance with Town Code Chapter 234, Article 18, Section 76 to 85.

Proposed Use of Each Structure:

- One Family Housing
- Multiple Family Housing
- Number of Families per building _____
- Apartment
- Townhouse
- Condominium
- Other _____

- Residential Garage/Carport
- Other Residential- Specify Use _____

Non-Residential- Specify Use _____

Setbacks from Property Line	Required	Provided
Front:	_____	_____
Back:	_____	_____
R Side:	_____	_____
L Side:	_____	_____

Maximum Height of Structure(s): _____

Number of off Street Parking Spaces: _____

Sewer Connection or Septic Tank: _____

Water Connection or Well: _____

Storm water Management provided _____ (Yes or No)

Date of Zoning Approval by Town:

Signature:

Box to be filled in by Town

Building Permit

- Principal Type of Structure:
- Masonry (Wall Bearing)
 - Wood Frame
 - Structural Steel
 - Reinforced Concrete
 - Other – Specify _____

- Type of Construction:
- Built on Site
 - Modular and Delivered to Site
 - Other – Specify _____

*Structure Details; fill out all below that applied to Application:

Dimensions in Feet: _____
 Number of Stories, Sq. Ft. of Each: _____

 Principal Type of Heating System: _____
 Principal Type of A/C System: _____
 Type of Foundation for Structure: _____
 Type of Siding: _____
 Type of Roofing: _____
 Type of Driveway/Access Finish: _____
 Size of Porch and Deck, if included: _____

 Size of Garage, if included: _____
 Size of pool, if included: _____

***Floor plans and sections shall be submitted for each building.**

Comment/Added Information: _____

Include additional sheets if needed.

Date Building Permit issued by Town:
 Signature:
 Box to be filled in by Town

Application must receive a Sussex County Permit prior to construction of any temporary or permanent structures. Sussex County will provide the inspection of structures during construction.

Occupancy Permit

Town Occupancy Permit will not be issued until the Sussex County Permit is received. This application must be complete with all required information.

Date Occupancy Permit issued by Town:
 Signature:
 Box to be filled in by Town

Applicant Signature

The applicant and property owner understands that all certifications on Form 1, Initial Project Review Application, continue to apply.

Signature of applicant(s): _____
Print Name(s): _____
Date Signed: _____