

**HAYCOCK TOWNSHIP**  
640 Harrisburg School Road  
Quakertown, PA 18951  
215-536-3641 FAX 215-536-7211  
Building Dept 215-538-4066

**Zoning and Building Permit Application**

Tax Parcel No. \_\_\_\_\_ Zoning District \_\_\_\_\_ Date \_\_\_\_\_

Zoning Permit No. \_\_\_\_\_ Building Permit No. \_\_\_\_\_

Zoning Fee \_\_\_\_\_ Building Fee \_\_\_\_\_

Stormwater \_\_\_\_\_ Conservation District \_\_\_\_\_  
Fee Collected Approval Date Approval Date

Zoning Final Inspection \_\_\_\_\_ Building Final Inspection \_\_\_\_\_

.....Above For Office Use .....

\_\_\_\_\_  
Applicant Phone E-mail

\_\_\_\_\_  
Address

\_\_\_\_\_  
Owner (if different from applicant) Phone

\_\_\_\_\_  
Address

\_\_\_\_\_  
Location of Property

\_\_\_\_\_  
Contractor License No.

\_\_\_\_\_  
Address Phone

**Proposed Use**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Total square feet of proposed footprint \_\_\_\_\_ of complete structure \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_ Number of Floors \_\_\_\_\_ Height \_\_\_\_\_ Cost: \_\_\_\_\_

**All applications must include SITE LAYOUT PLAN indicating:**

- \* Location and dimensions of proposed structure including distances from property lines
- \* Location and dimensions of all existing structures, driveway, well, septic
- \* Environmental features (ponds, streams, woodlands, etc.)

Dimensions and locations presented by applicant will be deemed accurate.

**All applications must include:** 2 copies of the Building Plan

**IT IS THE APPLICANTS RESPONSIBILITY TO:**

- \* Contact the office for a pre-construction stakeout
- \* Schedule inspections with Building Dept as needed
- \* Contact the township office for a final inspection

**Consent :** INITIAL HERE \_\_\_\_\_ **YES or NO** - I hereby give my consent allowing Haycock Township representatives to enter my property without prior notice in order to make the above inspections.

**I CERTIFY THAT THIS INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT NON-COMPLIANCE WITH THE DESIGN RECOMMENDATIONS SET FORTH BY THE ROADMASTER AND/OR ENGINEER MAY JEOPARDIZE THE ISSUANCE OF ANY OCCUPANCY PERMIT.**

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**Application will not be considered for action until all required information is submitted.**  
 ..... Below For Office Use .....

**ZONING**

\_\_\_\_\_ **Zoning Permit Granted** subject to Zoning Officer Directives:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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**Zoning Department Approval for Project**      **Date**      **Zoning Final Inspection**      **Date**

**BUILDING**

\_\_\_\_\_ **Building Permit Granted** subject to Building Inspector Directives:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Plumbing certification: \_\_\_\_\_

Mechanical certification: \_\_\_\_\_

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**Building Department Approval for Project**      **Date**      **Building Final Inspection**      **Date**

