



Zoning Permit Requirements for PATIOS

RESIDENTIAL PERMIT REQUIREMENTS:

1. An approved Zoning permit issued by the East Fallowfield Township Zoning Official is required.
 - a. Fill out a zoning permit application in full.
 - b. Submit two (2) copies of your plot plan showing:
 - i. existing structures (including house, driveway, accessory structures, well, septic tank/system, etc.),
 - ii. proposed addition, and
 - iii. the proposed setbacks to the property line for the addition.
 - c. Submit details of the patio construction with the application.
2. Provide a copy of all Contractors Certificate of Insurance and Workman's Compensation showing East Fallowfield Township as insured or fill out the exempt form provided for Workman's Compensation.
3. Provide a copy of all Contractors PA Home Improvement License from the State Of Pennsylvania.
4. Provide a copy of your Homes Owners Associations (HOA) approval letter with your application.
(If you live in a neighborhood that has a HOA).

Notes: (a) the above instructions are guideline for the permit process. Others items may be required if the Code Official deems it's required. (b) If any of the above items are not submitted to East Fallowfield Township and apply to the proposed project – it will cause a delay in the review process of the permit.



REQUIRED INSPECTIONS:

1. An attached sheet to your permit will be issued for all the required inspections when the permit is issued.
2. The applicant is required to schedule ALL inspections with East Fallowfield Township.
 - a. All inspection requests require a written notice 24 hours in advance and can be faxed to 610-635-6077 or emailed to permits@eastfallowfield.org.
 - b. Inspections are available Monday through Friday ~~between 9 AM and 11:00 AM.~~
 - c. Please include the address of the property, the permit number, the day and time of the inspection and the type of inspection you would like to have done. A contact number for the permit holder must be included so our inspector can call them.
3. All zoning permits for patios must have a final inspection performed to close out the zoning permit.

Nick Vendetta
Building Code Official
Keystone Municipal Services
East Fallowfield Township
610-384-7144
codeofficer@eastfallowfield.org

Sue Sereditch
Permits & Inspections Facilitator
East Fallowfield Township
610-635-6077
permits@eastfallowfield.org



East Fallowfield Township
Chester County, PA



Allow 30 days for processing

\$75.00 Fee

Permit #: _____

USE AND ZONING PERMIT

Application to Zoning Officer for Approval of Construction, Alteration, Use and Zoning

NOTICE: Any person or neighbor aggrieved by the issuance of this permit may have a right to appeal, including grants or variances. Such appeal shall be within 30 days of approval. Because of the potential for appeal, any expenditures made prior to such expiration to the appeal period, or during pendency of an appeal if filed, are at the permit holder's risk.

Any permit issued from this application shall be deemed valid only for a period of six (6) months. Nothing contained herein shall be construed to permit the beginning of construction of any building or alteration thereof until a building permit has been obtained from the Building Inspector of East Fallowfield Township and nothing herein contained shall be construed to permit the occupancy of any building for which an application has been made until the Building Inspector certifies that he has inspected the work and approves the same as being in conformity with the applicable Township Ordinances.

For all permit and building requirement questions, contact our Code Officer at 610-635-6292 or codeofficer@eastfallowfield.org

Property Address: _____ Date: _____
Applicant's Name & Address: _____
Applicant Phone #: _____ Owner Phone #: _____
Owner's Name & Address: _____
Contact Email: _____ Owner Email: _____

Complete only items Applicable

Use of Proposed New Structures or Property Use: _____

Use of Existing Structure: _____

Proposed Change of Use of Existing Structure: _____

Must Complete

Lot Dimensions		Dimensions of Proposed Structure		Proposed Setbacks	
Width at Front		Length		Front	
Width at Rear		Width		Rear	
Right Side Depth		Height		Right Side	
Left Side Depth				Left Side	

ESTIMATED COST OF WORK: \$ _____

A PLOT PLAN MUST BE ATTACHED locating all existing and proposed man-made structures and shall include their dimensions and setbacks to a least two property lines. In addition, the plan must include driveways, streams, north arrow, etc.

When approved by the Zoning Officer, this form becomes a Use and Zoning Permit.

For Zoning Officer Use Only

Date Received: _____ Date Reviewed: _____

Approved: _____ Denied: _____

Remarks: _____

Applicant Signature

Zoning Officer Signature

COUNTY OF CHESTER ASSESSMENT OFFICE

313 W. MARKET STREET, SUITE 4202, P.O. BOX 2748, WEST CHESTER, PA 19380-0991

610-344-6105
Fax 610-344-5902
www.chesco.org

JONATHAN B. SCHUCK, MBA CPE
Director of Assessment

Dear Property Owner:

As you have applied for a building permit from your municipality, the county Assessment Office would like to advise you of the steps surrounding our involvement in the process. We would like to make sure that you are aware of what will take place during construction and after the improvement is finished.

- 1) The municipality is required to supply a list of all building and zoning permits to the Assessment Office monthly.
- 2) An assessor will visit your property when they are in your municipality (generally rotate through every 2 – 3 months).
- 3) When arriving at your property, the assessor will come to the front door and identify themselves wearing a Chester County I. D. badge and will present a business card. They will ask you questions about the building permit and may need to measure the improvements (from the outside).
- 4) If you are not home when the assessor arrives, a business card will be left with a note on the flip side of the card. The assessor will proceed to the improvement and measure if the work is sufficiently complete. Otherwise they will mark it for a revisit the next time they are in the municipality.
- 5) Please cooperate with the assessor, as he or she is simply trying to get the correct information about your improvement, so there will be no mistakes on the county record.
- 6) After the construction is finished or 30 months has elapsed your improvement will be assessed and added to your property record card.
- 7) You will receive a notice from our office changing your assessment reflecting the addition of the new improvement. If you require more information please call our office at 610-344-6105 and ask to speak to the assessor assigned to your municipality.

It is the intention of this letter to inform you of the assessment process so that you realize that we will be visiting your property. Please note that due to time constraints we generally **do not make appointments**, unless absolutely necessary. Please be patient when an assessor knocks on your door and answer any questions to the best of your ability. Thank you for your anticipated cooperation.

Sincerely,
Jonathan B. Schuck
Director
Susan L. Caldwell, CPE.
Chief Assessor

Taxing Authority-please run additional copies of this letter when your supply runs low.



Workers' Compensation Insurance Coverage Information

ATTACH TO BUILDING PERMIT APPLICATION

A. The applicant is:

A contractor within the meaning of the Pennsylvania Worker's Compensation Law

☐ Yes

☐ No

If the answer is "yes", complete Sections B and C below as appropriate.

B. Insurance Information

CERTIFICATE OF INSURANCE MUST BE ATTACHED

Name of Applicant: _____

Federal or State Employer Identification No.: _____

Applicant is a qualified self-insurer for workers' compensation.

☐ Certificate attached

Name of Workers' Compensation Insurer: _____

Workers' Compensation Insurance Policy No.: _____

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 Pennsylvania's Workers' Compensation Law.

Subscribed and sworn to before me this
_____ day of _____ 20____

(Signature of Notary Public)

My commission expires: _____

(Seal)

Signature of Applicant

Address:

County of: _____

Municipality of: _____