



Hereford Township

Berks County, Pennsylvania

3131 Seisholtzville Road

Macungie PA18062

Main: (610)-845-2929 – Fax: (610)-845-0616

Website: www.herefordtownship.org

Official Use Only

Date Received: _____ Received by: _____

Permit Fee: **to be assessed by the inspector at the time application is approved.**

Payment Type: _____ Amount Received: _____ Date Received: _____

Zoning Permit No.: _____ Building Permit No.: _____

Zoning District: _____ Tax Parcel No.: _____

Date sent to BC Assessment Office: _____ Sent by: _____

A NON-REFUNDABLE fee as per the fee schedule will be applied to this permit. A deposit against total permit fee is required at the time of application to partially cover the administrative expenses involved in application processing. This deposit is NON-REFUNDABLE. However, the deposit will be applied against the total permit fee at the time the balance of the permit is made by the applicant. Permits are not considered issued until all fees are paid. All pending permits will expire and new applications will be required if the permit is not paid for and issued within 180 days from the date approved and signed by the zoning enforcement officer.

****Notice to Applicants:** Information on this form is public information and may be accessed by third parties in accordance with and subject to the requirements of the "Open Records Law"

Is there a legal reason your information should not be shared with a third party agency or available for public inspection: Yes No — If yes, please explain: _____

Mechanical, Electrical and Plumbing Permit

Date: _____

Name: _____

Phone No.: _____

Address: _____

Subdivision: _____ Lot No.: _____

Email Address: _____

Contractor: _____

Official Registration # of Contractor: _____

Phone No.: _____

Cell No.: _____

Address: _____

Estimated Cost: _____

Please complete workers' compensation insurance form

NOTE: To verify a contractor's registration number, visit the Pennsylvania Office of Attorney General's website at www.attorneygeneral.gov or call toll free 1-888-520-6680

I hereby certify that the information hereon and herewith is true and correct to the best of my knowledge.

Applicant's Signature: _____ **Date:** _____

Owner's Signature (if other than applicant): _____ **Date:** _____

Check appropriate box: Mobile Home or Manufactured Dwelling Single Family Dwelling
 Two Family Dwelling Apartment Building or Condominium Addition or Alteration
 Sewer Lateral Water Lateral Non-Residential Application: Specify: _____

Scope of Work Description: _____

Please Note: All applications must be accompanied by a floor plan drawing of the project.

- All application must be accompanied by Manufacturer's Specifications & Installation requirements.
- All commercial applications must be accompanied by completed plumbing drawings signed and sealed by a licensed architect or professional engineer.

MUST SUBMIT FOUR (4) SETS OF PLANS

Technicon Enterprises, Inc., II – Final Inspection Required – Call (610) 286-1622

Inspections Required: (\$80.00 for each Inspection required)

Rough Mechanical Final Mechanical Rough Plumbing Underslab Plumbing

Final Plumbing Electric Service Electric Rough Electric Final

Sprinkler Hydrostatic Test Final Sprinkler

Code Enforcement Officer: _____ Date Permit Approved: _____

Inspection Approved Inspection Disapproved **Inspection Date:** _____

(Technicon Enterprises, Inc., II – Please return inspection information upon completion)

When scheduling inspections, the contractor must ensure he has completed all items necessary for the inspection. Should the Building Inspector/Zoning Officer be required to make additional inspections, a fee of \$80.00 will be due to defray the cost of the inspection. The entire fee must be paid prior to the inspection. The fee is paid to the Municipality.