

**FOR OFFICE USE ONLY**

PERMIT NO \_\_\_\_\_ ISSUE DATE \_\_\_\_\_ ISSUED BY \_\_\_\_\_  
 PERMIT FEE \$ \_\_\_\_\_ DENIED DATE \_\_\_\_\_ DENIED BY \_\_\_\_\_

**CHADDS FORD TOWNSHIP  
 ZONING PERMIT APPLICATION**

10 Ring Road, Chadds Ford, PA 19317 Phone: (610) 388-8800  
 Fax: (610) 388-5057 E-mail: [info@chaddsfordpa.gov](mailto:info@chaddsfordpa.gov)

Property Owner \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Address \_\_\_\_\_ Fax No \_\_\_\_\_  
 Property Location \_\_\_\_\_ E-MAIL \_\_\_\_\_  
 Parcel # \_\_\_\_\_ Zoning District \_\_\_\_\_  
 Is Above Property Located in the Township's Floodplain? \_\_\_\_\_  
 Is Above Property Located in the Township's Historic District? \_\_\_\_\_

Contractor \_\_\_\_\_  
 Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Fax No. \_\_\_\_\_ E-MAIL \_\_\_\_\_ PA License No. \_\_\_\_\_  
 Architect /Engineer \_\_\_\_\_  
 Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Fax No. \_\_\_\_\_ E-MAIL \_\_\_\_\_ PA License No. \_\_\_\_\_

| Type of Improvement (check all that apply)  | Proposed Use  |
|---|---|
| <input type="checkbox"/> New Construction <input type="checkbox"/> Addition                   | <input type="checkbox"/> Residential                |
| <input type="checkbox"/> Deck <input type="checkbox"/> Shed <input type="checkbox"/> Patio    | <input type="checkbox"/> 1 & 2 Family Dwelling      |
| <input type="checkbox"/> Pool <input type="checkbox"/> Fence <input type="checkbox"/> Trailer | <input type="checkbox"/> Garage                     |
| <input type="checkbox"/> Permanent Sign   | <input type="checkbox"/> Commercial (Specify below) |
| <input type="checkbox"/> Temporary Sign (List dates):   |   |
| <input type="checkbox"/> Other (Specify)  |   |

**Description of work** \_\_\_\_\_

**Square footage of project** \_\_\_\_\_

**Cost of construction \$** \_\_\_\_\_

I hereby certify that I am the owner of record of the named property, or 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. I hereby attest to the information on this application to be accurate and true to the best of my ability. I agree to conform to all applicable laws of Chadds Ford Township and certify that the code official or code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable of such permit.

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

**NOTE:** Construction work, activity or the use of domestic power tools are not exempt from the Township's Noise Ordinance, Chapter 89 except as follows:

Section 89-6 F. and 89-6 G. Exemptions, "Sounds emanating from construction work and/or the repair of any structure, but only between the hours of 7:00 a.m. and 5:00 p.m., Monday through Friday, and on Saturday between the hours of 9:00 a.m. and 5:00 p.m.," and "Sounds emanating from the use of domestic power tools: any mechanically powered saw, drill, sander, grinder, lawn or garden tool, lawn mower, blower, powered trimmer or similar device used outdoors in residential areas between the hours of: 8:00 a.m. and 5:00 p.m. on Saturdays, Sundays and legal holidays; and 7:00 a.m. and 7:00 p.m. Monday through Friday."