



# CHALFONT BOROUGH

40 North Main Street, Chalfont, PA 18914  
Phone: 215-822-7295 • Fax 215-822-5528  
Email: info@chalfontborough.com

## ROAD OCCUPANCY & STREET OPENING PERMIT APPLICATION

Permit #: \_\_\_\_\_ Payment Date: \_\_\_\_\_ Amount: \$ \_\_\_\_\_  
Payment/CC Ref #: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant's Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

24 Hr/Emergency Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Proposed Work: \_\_\_\_\_

Borough Street:  State Road:  (Additional Permit required from PennDOT)  
State Roads within Chalfont Boro: Bristol Rd, Butler Ave, S Limekiln Pk, N. Main St. (Rt. 152), Park Ave, Sunset Ave.

Type of Proposed Work: \_\_\_\_\_ (also submit sketch on following page)

Dimensions of Proposed Work: \_\_\_\_\_

Start Date: \_\_\_\_\_ (Ten day maximum to complete work) Completion Date: \_\_\_\_\_

PA ONE- CALL (811) Three Working Days Before Digging PA One-Call Serial Number: \_\_\_\_\_

**Contractor performing work must register with Chalfont Borough. A Contractor Registration application is attached and must be completed and submitted with this application.**

Signature of Applicant: \_\_\_\_\_

Permit Application Fees: (non-refundable)	Received:	By	Date
A. Road Openings..... \$100.00 (plus \$1.00 additional per linear foot on openings over 20 lf)	<input type="checkbox"/>	_____	_____
B. New or Altered Driveways, Sidewalks and/or Aprons..... \$150.00	<input type="checkbox"/>	_____	_____
C. Roadway Frontage/Storm Drain Improvement/Grading ..... \$250.00	<input type="checkbox"/>	_____	_____
D. Utility Pole Replacement..... \$50.00/pole	<input type="checkbox"/>	_____	_____
<u>Escrow Amount</u> shall be established on a case-by-case basis, but shall not be less than \$1,000.00 (Refundable after 18 months with satisfactory final inspection or written cancellation of project.)	<input type="checkbox"/>	_____	_____
<u>Maintenance Bond</u> to be established at the time of substantial completion of project. (Refundable after 18 months with satisfactory final inspection.)	<input type="checkbox"/>	_____	_____
<b>FEES WILL BE DOUBLED IF WORK COMMENCES WITHOUT PROPER PERMITS</b>			

- THIS PERMIT IS VALID FOR 180 DAYS.
- BOROUGH of CHALFONT MUST PERFORM INSPECTIONS DURING WORK-IN-PROGRESS AND AFTER WORK HAS BEEN COMPLETED. Call 215-822-7295 TO SCHEDULE INSPECTION(S).
- STREET MUST BE RESTORED TO BOROUGH SPECIFICATIONS. (DETAILS ATTACHED)
- NO ROAD CAN BE CLOSED OR EXCAVATION LEFT OPEN WITHOUT BOROUGH PERMISSION. ADEQUATE WARNING SIGNS, BARRICADES, PLATES OR OTHER DEVICES MUST BE PLACED TO PROVIDE SAFE VEHICLE AND PEDESTRIAN TRAVEL.
- UTILITIES MUST PROVIDE 30 DAYS NOTICE TO CHALFONT BOROUGH PRIOR TO BEGINNING WORK.

Final Inspection Date: \_\_\_\_\_ By: \_\_\_\_\_

## ZONING CONFORMITY INFORMATION

**\*\*Impervious Surface Calculations are Required for all Exterior Projects**

House Size (with garage) Footprint (sq. ft.)	Pool & Decking (exclude water area) (sq. ft.)
Driveway (sq. ft.)	Detached Garage (sq. ft.)
Walkway (sq. ft.)	Shed(s) (sq. ft.)
Concrete/Stone/Pavers Patio area (sq. ft.)	Proposed Work (sq. ft.)
Fence (linear ft.)	Other

**A. (Total Impervious area sq. ft. listed above) =**

A. Total Impervious Area (sq. ft.)	B. Lot Size (sq. ft.)	(B divided by A) % Impervious Surface =
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**MAXIMUM IMPERVIOUS SURFACE ALLOWED BY ZONING DISTRICT:**

<input type="checkbox"/> R-1 Low-Density Suburban Residential      40 % <input type="checkbox"/> R-2 Village Residential                              45 % <input type="checkbox"/> R-3 Planned Residential                                40 % <input type="checkbox"/> R-4 Small-Lot Single Family Residential        40 % <input type="checkbox"/> CC Corridor Commercial                                75 %	<input type="checkbox"/> B12 Planned Village Development              90 % <input type="checkbox"/> BC Borough Commercial                                90 % <input type="checkbox"/> LI Light Industrial    90 % <input type="checkbox"/> VOC Village Office Commercial                    Refer to Ordinance <input type="checkbox"/> OS/P Open Space Parkland                                5 %
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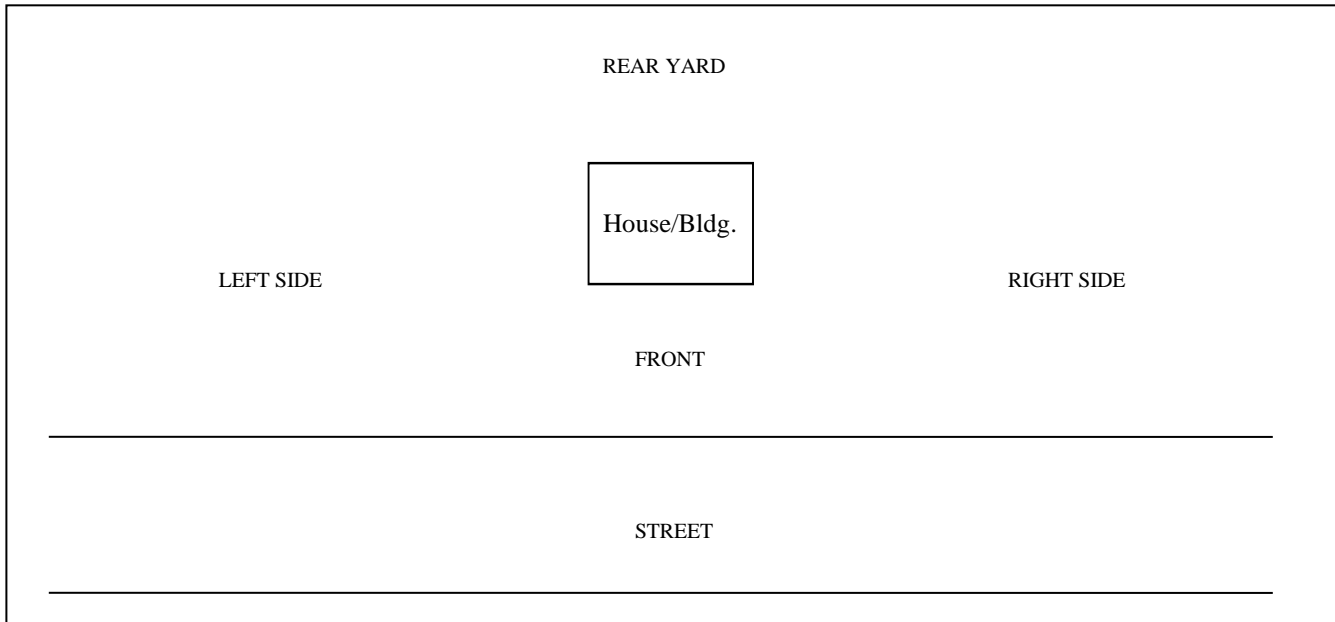
\*\* "IMPERVIOUS" = INCAPABLE OF BEING PENETRATED BY WATER (HOUSE, DRIVEWAY, WALKWAY, PATIO, SHED, etc ....)

## SETBACK INFORMATION

Front Yard Setback	Rear Yard Setback	Side Yard Setback (R)	Side Yard Setback (L)
Building Height	Crossing an Easement? <input type="checkbox"/> Yes <input type="checkbox"/> No		

**PROVIDE A SKETCH FOR THE LOCATION OF PROPOSED IMPROVEMENTS:**

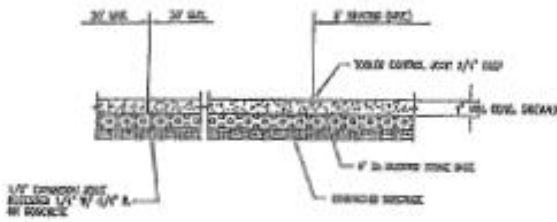
**Chalfont Borough reserves the right to request a plot plan prepared by a licensed surveyor.**



**NOTE: PERMIT SUBMISSION DOES NOT GRANT "APPROVAL" TO START WORK.**

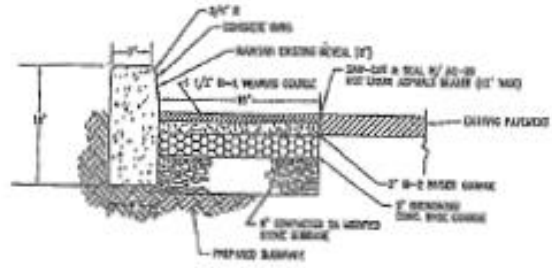
I agree to comply with all applicable codes, statutes and ordinances, and with the conditions of this permit; I understand that the issuance of the permit creates no legal liability, express or implied, on Chalfont Borough; and certify that all the above information is accurate. Permit expires if work is not started in 6 months, not completed in 12 months, or if work is discontinued for 6 months in the judgment of the Borough. The Building Inspector, or the Inspector's authorized agent, is authorized to enter the premises for which this permit is sought at all reasonable hours and for any proper purpose to inspect the proposed work. Failure to comply with the above will result in a STOP WORK order.

# CHALFONT BOROUGH, BUCKS COUNTY, PA

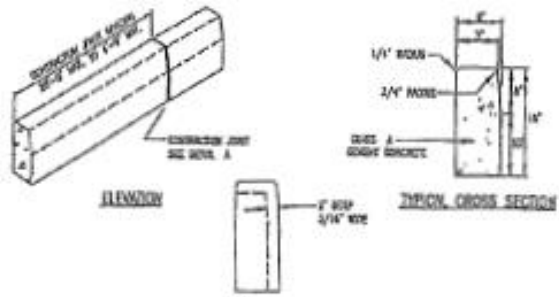


- NOTE:
1. 1/2" CONCRETE JOINT SHOULD BE PLACED AT ALL DRIVEWAY FINISHES. ALL DRIVEWAY FINISHES SHALL BE ON COMPACTED FILL WITH A MINIMUM COMPRESSIVE STRENGTH OF 3000 PSI (GRADE AT 20000 PSI) = 4" MIN.
  2. IF DRIVEWAY FINISHES, SIDEWALK SHALL BE A MINIMUM 6" THICK AND REINFORCED WITH WIRE OF 1/2" DIA. WIRE.
  3. SLOPE SHOULD BE DETERMINE - 1/4" PER FOOT.

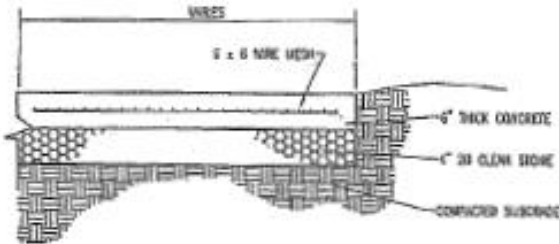
**CONCRETE SIDEWALK DETAIL**  
N.E.A.



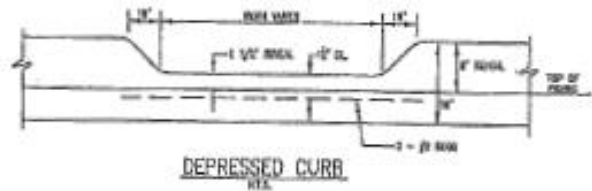
**CURB REPLACEMENT DETAIL**  
N.E.A.



**PLAIN CEMENT CONCRETE CURB**  
N.E.A.



**TYPICAL CONCRETE DRIVEWAY APRON**  
N.E.A.



**DEPRESSED CURB**  
N.E.A.

**NOTES:**

- 1) WIDTH TO MATCH EXISTING APRON
- 2) SLOPE TO MATCH EXISTING DRIVEWAY AND NEW CURB ELEVATIONS AS DETERMINED BY THE ENGINEER
- 3) RESTORE ALL PAVED DRIVEWAYS WITH SAME MATERIALS REQUIRED FOR CURB DRIVEWAY DEPRESSION REPLACEMENTS.

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March 2002

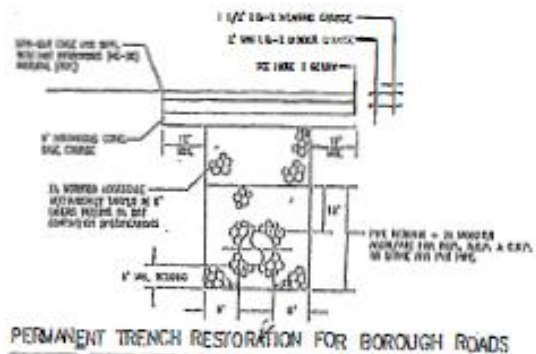
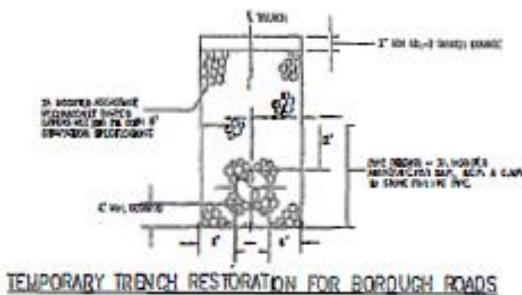


**CKS Engineers, Inc.**

# CHALFONT BOROUGH, BUCKS COUNTY, PA UTILITY TRENCH RESTORATION - GENERAL NOTES

## GENERAL NOTES:

1. THE CONTRACTOR SHALL CONTACT ALL UTILITIES OR PRIVATE CONCERNS, IN COMPLIANCE WITH THE REQUIREMENTS OF P.L. 652, NO. 287, DECEMBER 10, 1974 AS AMENDED ON DECEMBER 19, 1996 BY ACT NO. 187, 72 HOURS PRIOR TO ANY EXCAVATION BY CALLING 1-800-242-1776
2. UTILITY TRENCHES WITHIN STATE OR COUNTY ROADWAYS SHALL BE RESTORED IN ACCORDANCE WITH THE REQUIREMENTS OF THE APPLICABLE GOVERNING AGENCY.
3. THE CONTRACTOR SHALL CONTACT THE BOROUGH PUBLIC WORKS DIRECTOR 215-822-7295 A MINIMUM OF 48 HOURS IN ADVANCE OF ANY WORK BEING PERFORMED WITHIN THE ROADWAY RIGHT-OF-WAY.
4. INITIAL (TEMPORARY) TRENCH RESTORATION SHALL BE PERFORMED IN ACCORDANCE WITH THE ABOVE DETAIL IMMEDIATELY AFTER THE UTILITY IS INSTALLED. FINAL (PERMANENT) TRENCH RESTORATION SHALL BE PERFORMED IN ACCORDANCE WITH THE ABOVE DETAIL, 90 DAYS (MINIMUM) TO 120 DAYS (MAXIMUM) AFTER TEMPORARY TRENCH RESTORATION IS PERFORMED.
5. ALL STREET ROADWAY PAVEMENT SHALL BE CUT BY A MECHANICAL SAW OR PAVING CUTTER.
6. ANY ITEMS (I.E. CURB, PAVED SURFACES OUTSIDE THE LIMIT OF WORK, ETC.) DAMAGED AS A RESULT OF THE CONTRACTOR'S OPERATIONS SHALL BE REPLACED IN KIND, AT THE CONTRACTOR'S EXPENSE TO THE SATISFACTION OF THE BOROUGH.
7. THE CONTRACTOR SHALL BE RESPONSIBLE FOR THE MAINTENANCE OF TEMPORARY PAVEMENT UNTIL IT IS REPLACED WITH PERMANENT PAVEMENT.
8. BITUMINOUS MATERIAL FOR BASE AND SURFACE COURSES OF PERMANENT PAVEMENT REPLACEMENT SHALL NOT BE PLACED WHEN THE AIR TEMPERATURE IS 40° F OR LOWER, NOR WHEN THE TEMPERATURE OF THE PAVEMENT, BASE OR BINDER ON WHICH IT IS TO BE PLACED IS 40° F OR LOWER, AS DETERMINED BY THE BOROUGH OR THEIR ENGINEER.



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March 2002



**CKS Engineers, Inc.**



# CHALFONT BOROUGH

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Email: info@chalfontborough.com

Boro Contr. Reg. #: \_\_\_\_\_

## **CONTRACTOR / SUBCONTRACTOR REGISTRATION APPLICATION**

All **New Home or Commercial Construction Contractors** are required to register with Chalfont Borough, provide a Certificate of Insurance, and pay a fifty dollar (\$50.00) application fee.

**All other Contractors, including Home Improvement and Repair**, must submit a copy of your certificate from the Commonwealth of Pennsylvania as a PA registered Home Improvement Contractor, and a Certificate of Insurance. Failure to provide this information will require a fifty dollar (\$50.00) application fee.

- **Proof of Certification with the Commonwealth of Pennsylvania** indicating compliance with the Pennsylvania Home Improvement Consumer Protection Act 132.
- **Certificate of Insurance**, indicating compliance with PA Act 44 of 1993 regarding Workers' Compensation; Liability Insurance with "Chalfont Borough" identified as "**Certificate Holder** and **Additional Insured.**"

Do not mail cash, please make checks payable to "**Chalfont Borough.**" The Borough also accepts credit cards (there is a small processing fee charged). **PLEASE NOTE:** Registration will expire on December 31<sup>st</sup> of the year issued.

Today's Date: \_\_\_\_\_

Pursuant to Chalfont Borough Ordinance No. 334, I/We hereby apply for Contractor/Subcontractor Registration:

### **COMPANY INFORMATION**

Firm Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Fax: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact's Cell: \_\_\_\_\_

Contact's Email: \_\_\_\_\_

Type of Business: \_\_\_\_\_  Individual Proprietorship  Partnership  Corporation

PA Home Improvement Contractor Registration #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Number of Employees: \_\_\_\_\_

I/We, hereby certify that the statements contained herein are true and correct, to the best of my/our knowledge and belief. I/We understand that if I/we knowingly make a false statement herein, I/we am/are subject to such penalties as may be prescribed by law and/or Ordinance.

I/We authorize Chalfont Borough to obtain any information that may be required for the Borough to verify statements contained within this application, all information shall remain the property of Chalfont Borough.

Applicant Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

Registration is for IDENTIFICATION and INSURANCE PURPOSES ONLY and does not attest to the competency of the applicant.

### **OFFICIAL USE ONLY**

PAYMENT DATE: \_\_\_\_\_ BOROUGH ASSIGNED PERMIT #: \_\_\_\_\_

BORO ASSIGNED CONTRACTOR #: \_\_\_\_\_ PA CONTRACTOR REGISTRATION #: \_\_\_\_\_

FEE: \$ \_\_\_\_\_ PAYMENT TYPE: \_\_\_\_\_ CHECK OR TRANSACTION #: \_\_\_\_\_