



P.O. Box 1, Pocopson PA 19366  
Office: 610.793.2151 Fax: 610.793.1944  
[www.pocopson.org](http://www.pocopson.org)

# POCOPSON TOWNSHIP DECK PERMIT APPLICATION PACKET IMPORTANT PLEASE READ!

---

The Permit Application Process will take approximately 15 working days. If any construction commences before a permit is issued and paid for the permit fees will be doubled.

**Non-refundable fees:** A non-refundable fee must be included when a building permit application is submitted. The non-refundable fees are:

- Administrative fee for all permits requiring zoning review \$25.00
- Building permit review \$25.00
- TOTAL FEE DUE IF ZONING AND BUILDING REVIEW \$50.00

All non-refundable fees are subtracted from the final permit fee that is due when the permit is picked up.

The building permit application must be signed by the landowner/applicant. If the applicant is NOT the landowner a written statement indicating that the applicant will act as agent/representative is required.

**PLEASE NOTE:** The Township requires two (2) copies of a plot plan showing your setbacks, your construction prints, and the estimated cost of your project. Your application cannot be approved without this information showing your setbacks.

Inspections are mandatory for all projects. Work shall not be done beyond the point indicated in each successive inspection without first obtaining the approvals. It is the duty of the permit holder to notify the Building Inspector, Zoning Official, or other Township Official that work is ready for inspection. If inspections are ignored the permit will be revoked.

All electrical inspections are performed by United Inspection Agency. Contact Len Warren at 610-399-5094 or fax to 610-399-5126 to schedule an electrical inspection.

**PERMIT MUST BE VISIBLE FROM THE STREET UNTIL COMPLETION OF  
CONSTRUCTION (May place in Front Window)**



## DECK PERMIT APPLICATION

Applicants must read all instructions and submit the following completed documents prior to issuance of a building permit:

1. **A non-refundable fee of \$50.00. This charge is subtracted from the final permit fee that is due when the permit is picked up.**
2. **Signed approval from the homeowners association (if applicable)**
3. Pocopson Township Building Permit Application including description of proposed use of the structure and include each document as described below:
  - a. Plot Plan (2 copies) to a scale which is practical and legible showing the following:
    - i. lot size and metes and bounds (property description)
    - ii. landowner name, address, and date of the Plot Plan
    - iii. direction of North
    - iv. right-of-way lines and dimensions, easement lines and dimensions, contour lines for sloping lots or spot elevations for level lots. **PLEASE NOTE: Township Engineer and/or Zoning Officer may require a complete grading plan for steep slope lot or lots with unusual topographic conditions and for any grading changes or land disturbance**
    - v. **PLEASE NOTE: Setback lines must show property lines, front, rear, and side yard setback dimensions, location of all structures on property and location of well and septic tank**
    - vi. physical features such as catch basins, utility structures, rock outcroppings, streams, and location of existing buildings, parking areas and driveway(s) marked as "new" or "existing"
    - vii. location of sanitary sewage facilities and all wells
    - viii. location of proposed structure (footprint) for which the building permit is requested
    - ix. provisions for erosion and sedimentation control and stormwater management
  - b. Construction drawings - two (2) copies - to be presented in a form generally accepted by construction industry standards. Sealed drawings not required for a typical deck. Plans to be properly oriented. Reverse will not be accepted.



**IMPORTANT - PLEASE READ:**

☐ **FAILURE TO PROVIDE ALL INFORMATION AS REQUIRED ABOVE WILL BE CAUSE FOR DENIAL OF PERMIT.**

☐ **THE PERMIT APPLICATION PROCESS WILL TAKE APPROXIMATELY 15 WORKING DAYS. IF ANY CONSTRUCTION COMMENCES BEFORE A PERMIT IS ISSUED AND PAID FOR THE PERMIT FEES WILL BE DOUBLED.**

☐ **QUESTIONS REGARDING THE BUILDING PERMIT APPLICATION AND REVIEW PROCESS SHOULD BE DIRECTED TO THE BUILDING INSPECTOR AT 610-793-9390 OR BY EMAIL TO [buildinginspector@pocopson.org](mailto:buildinginspector@pocopson.org).**

☐ Individuals improving and/or developing a single lot after subdivision has occurred must execute a Professional Services Agreement with the municipality to cover all miscellaneous costs incurred with the project. **Zoning and/or Building Permits will not be issued without this agreement.** For additional information regarding this requirement please contact the Township Secretary at 610-793-2151 or email to [secretary@pocopson.org](mailto:secretary@pocopson.org).

**BUILDING PERMIT PROCEDURES**

A Building Permit is required for all new construction, alterations and demolition within the Township, including porches, patios, decks, swimming pools, and sheds. Prior to starting any work, the landowner or agent must obtain the appropriate permits and forms from the Township for the proposed project. **Please read all of the following information - it will help you properly complete the building permit application.**

**BUILDING PERMIT FEES**

Schedule of fees for zoning and building permit applications established by current Pocopson Township Resolution. (Contact the Township Office at 610-793-2151 for a copy of the Resolution or visit the Township website at [www.pocopson.org](http://www.pocopson.org))

**COUNTY OF CHESTER ASSESSMENT OFFICE**

Pocopson Township is required to supply a list of all building and zoning permits to the Assessment Office monthly. Following completion of your project your improvement to your property will be assessed and added to your property record card. For additional information contact the Assessment Office at 610-344-6105.



## HOW TO COMPLETE THE 4-PAGE BUILDING PERMIT APPLICATION FORM

General information - provide the application date and type of permit.

**Part 1:** Location of Project - provide street address and complete all sections in full. (Parcel number and zoning district information is available from Pocopson Township.) A detailed plot plan indicating the entire property and the location of the proposed construction must be provided with the Zoning Permit Application.

**Part 2:** Type and Cost of Project - provide size and square footage, type of improvement, ownership, cost and proposed use. If proposed use is not specifically identified within the form, please note Item #17 and indicate use.

**Part 3:** Selected Characteristics of Project - provide type of construction, principal type of heating fuel, type of mechanical, sewage disposal and water supply. Include dimensions of proposed structures, number of bedrooms proposed and number of parking spaces.

**Part 4:** Identification - provide signature of applicant along with an address and a phone number (or cell phone number) where applicant can be reached during business hours; **if applicant is not the property owner a written statement indicating that the applicant shall act as agent/representative shall accompany the application.** If work is being done by a contractor, please provide the name of the person responsible for performing the work and a phone number where that person can be reached during business hours. A Certificate of Insurance for each contractor working on the project, verifying insurance and workers compensation coverage, must accompany the completed and signed building permit application. **Contractors performing home improvements totaling \$5,000 or more per year must provide an official registration number in accordance with the Pennsylvania Home Improvement Consumer Act of July 1, 2009.**

**Parts 5 through 7** - to be completed by Township Officials.

**Part 8:** Site or Plot Plan - provide a sketch of the property indicating all property lines, existing and proposed structures, all driveways and access walkways and patios. Indicate on this plan all site restricted areas including deed restrictions, wetland areas, steep slope areas, easements, etc.

**PLEASE NOTE:** If the property is located within an established homeowners association, the applicant shall provide a copy of the letter of approval from the homeowners association with the application to the Township.



## PLANS AND SPECIFICATIONS

The applicant must submit **two (2) copies of the plans and specifications** with each Building Permit Application in order for the plan reviewer to determine if the proposed construction complies with all applicable building codes.

**PLANS FOR A DECK** shall include but may not be limited to the following:

1. plot plan indicating location of the deck on the property provided with the Zoning Permit Application.
2. footing layout plan indicating each footing location, size and type.
3. detailed framing plan indicating the size, spacing and attachment method of all members.
4. railing and stair detail indicating size, spacing and attachment method of all members.

## REVIEW PROCESS

The application will be reviewed by the Township Officials for compliance with the Township Zoning Ordinances and any other applicable Ordinances of Pocopson Township, as well as the requirements of the Uniform Construction Code for the Commonwealth of Pennsylvania. The Permit Application Process will take approximately 15 working days. If the proposed project does not comply in any way with the applicable Ordinances and/or Codes, the applicant will be notified by phone and/or mail regarding the specific item or items to be addressed. **The Plan Reviewer may amend, correct and/or change minor items within the plans or specifications; it is the applicant's responsibility to construct the project to any amended plans and specifications.**

Township personnel will notify the applicant when the building permit is approved and available at the Pocopson Township Administration Office, 740 Denton Hollow Road. The Building Permit is to be displayed by the applicant so as to be visible from the street. **NOTE: Work may not be started until the permit has been granted, paid for and picked up.** All permitted projects shall begin construction within six (6) months from the date the permit is issued and for projects requiring zoning approval shall be completed within one (1) year from the date the permit is issued. Applicants may receive at the discretion of the Township an extension for up to one (1) additional year for completion of the project if they provide a written request to the Township with compelling evidence as to why the project has not been completed within the required one (1) year period.



## **INSPECTIONS**

**Inspections are completed on Monday and Thursday.** Inspections are necessary to insure that all work conforms to the approved plans and specifications, Township Code, and the Uniform Construction Code of the Commonwealth of Pennsylvania. Inspections are completed on Monday and Thursday. United Inspection Agency is the appointed electrical inspector. Notification for inspections at the various stages of construction is the responsibility of the applicant or landowner. All uninspected work will not be approved by the Building Inspector in accordance with all applicable Codes.

### **HOW TO SCHEDULE INSPECTIONS:**

Contact Len Warren, United Inspection Agency, at 610-399-5094 to schedule all electrical inspections (if applicable).

Contact the Building Inspector at 610-793-9390 to schedule an inspection or by email to [buildinginspector@pocopson.org](mailto:buildinginspector@pocopson.org). Inspections are completed on Monday and Thursday.

### **REQUIRED INSPECTIONS:**

- a. Footings scheduled after excavation and prior to placement of concrete for footings
- b. Rough frame scheduled after framing has been installed and prior to placement of deck
- c. Final inspection scheduled after the installation of all floor decking, stairs and railings

The Township reserves the right to perform additional inspections which may be required as determined by the Building Inspector or Township Officials, in the field, or on a case-by-case basis.



### ZONING PERMIT APPLICATION

Zoning permits shall be required for (1) use & occupancy of any building or other structure erected, altered or enlarged for which a building permit is required; (2) permitted change in use of any building or structure; and (3) change in nonconforming use or expansion or extension of a nonconforming use.

#### PROPERTY AND OWNER INFORMATION:

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

Chester County Tax Parcel Number: 63 - \_\_\_\_\_ - \_\_\_\_\_

Name of Property Owner(s): \_\_\_\_\_

Address of Record: \_\_\_\_\_

Telephone/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

If the Applicant is NOT the property owner an Agent's Affidavit is required.

Name of Applicant (if different from above): \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Telephone/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### ZONING CLASSIFICATION:

☐ RA - Residential and Agricultural Zoning District

☐ MHP - Mobile Home Park

☐ C1 - Neighborhood Commercial

☐ LI - Limited Industrial

#### USES:

Current Use of the Property: \_\_\_\_\_

Proposed Use of the Property: \_\_\_\_\_

#### Additional Approvals required (attach copy of the signed decision):

☐ Subdivision/Land Development

☐ Conditional Use

☐ Special Exception

Approved: \_\_\_\_\_

Approved: \_\_\_\_\_

Approved: \_\_\_\_\_

A plot plan is required showing property lines, front, rear, and side yard setback dimensions, location of all structures on property and location of well and septic tank. I certify that all of the information submitted with this application is true to the best of my knowledge and belief.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This Zoning Permit authorizes the establishment of the uses stated in this Permit at the location specified. The Zoning Permit is a prerequisite for obtaining a Building Permit. After the proposed improvements are completed a Use and Occupancy Certificate when applicable shall be obtained from Pocopson Township prior to the lot or structure being used and/or occupied.

☐ Application Approved ☐ Application Denied Date: \_\_\_\_\_ Zoning Permit # \_\_\_\_\_

Zoning Officer Signature: \_\_\_\_\_



## BUILDING AND IMPERVIOUS COVERAGE BREAKDOWN

### PART 1.

#### PROPERTY AND OWNER INFORMATION:

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

Name of Property Owner(s): \_\_\_\_\_

Address of Record: \_\_\_\_\_

Telephone/Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

#### ZONING CLASSIFICATION:

☐ RA - Residential and Agricultural Zoning District

☐ MHP - Mobile Home Park

☐ C1 - Neighborhood Commercial

☐ LI - Limited Industrial

**PART 2. Please complete if applicable to your project. Building Coverage: Building coverage is the percentage of your lot that is covered by buildings including sheds, garages, covered porches/patios, gazebos, and any structure with a roof.**

% allowed \_\_\_\_\_ (leave blank for calculation by Township Official)

Lot Size in square footage: \_\_\_\_\_ Square feet allowed (lot size X % allowed as decimal = \_\_\_\_\_)

*For example: 10,000 sq.ft. lot X .2 = 2000 sq. ft. allowable building coverage*

House footprint (square feet): \_\_\_\_\_ Total existing building coverage in square feet: \_\_\_\_\_

Total existing building coverage as a percentage of lot (total existing building coverage) ÷ (lot size) X 100 = \_\_\_\_\_% *Example: 2000 sq. ft. building footprint/10,000 sq. ft. lot = .2 X 100 = 20% building coverage*

Proposed construction (square feet) \_\_\_\_\_

Total building coverage existing & proposed (square feet) \_\_\_\_\_

Total proposed building coverage as a percent of lot (total building coverage existing & proposed) ÷ (lot size) X 100 = \_\_\_\_\_%

**PART 3. Please complete if applicable to your project. Impervious Coverage: Impervious coverage is the percentage of your lot that is covered by structures with a roof (for instance house, shed(s), garage(s), covered porch(es), covered patio(s), gazebo(s)), plus any paved surfaces.**

% allowed \_\_\_\_\_ (leave blank for calculation by Township Official)

Lot Size in square footage: \_\_\_\_\_

Impervious coverage allowed (lot size X % allowed as decimal) = \_\_\_\_\_



*For example: 10,000 sq.ft. lot X .2 = 2,000 sq. ft. allowable impervious coverage*

House footprint (square feet): \_\_\_\_\_ Total existing impervious coverage in square feet: \_\_\_\_\_  
Total existing building coverage as a percentage of lot (all structures and paved surfaces / lot size) X  
100 = \_\_\_\_\_%

*For example: 2000 sq. ft. building footprint + 100 sq. ft. paved surfaces/10,000 sq. ft. lot = .21 X 100 =  
21% impervious coverage*

Proposed construction or additional paving (square feet): \_\_\_\_\_

Total impervious coverage existing and proposed: \_\_\_\_\_ (square feet)

Total proposed impervious coverage as a percent of lot (all structures with a roof + paved surfaces/lot  
size) X 100 = \_\_\_\_\_%

**If impervious coverage is over the allowable limit, please contact the  
Township Administration Office at 610-793-2151.**



Pocopson Township  
P.O. Box 1  
Pocopson, PA 19366

TELEPHONE:  
610-793-9390 / 610-793-2151  
FAX: 610-793-1944  
STREET ADDRESS: 740 Denton  
Hollow Rd., West Chester

APPLICATION FOR  
PLAN EXAMINATION  
BUILDING AND ZONING  
PERMIT

**IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, and VIII**

**I. LOCATION OF BUILDING**

AT (LOCATION) \_\_\_\_\_ (NO.) \_\_\_\_\_ (STREET) \_\_\_\_\_ ZONING DISTRICT \_\_\_\_\_  
BETWEEN \_\_\_\_\_ (CROSS STREET) \_\_\_\_\_ AND \_\_\_\_\_ (CROSS STREET) \_\_\_\_\_  
TAX PARCEL NO. \_\_\_\_\_ LOT \_\_\_\_\_ LOT SIZE \_\_\_\_\_

**II. TYPE AND COST OF BUILDING - All applicants complete Parts A - D**

**A. TYPE OF IMPROVEMENT**

- 1 ☐ New building  
2 ☐ Addition (if residential, enter number of new housing units added, if any, in Part D, 13)  
3 ☐ Alteration (See 2 above)  
4 ☐ Repair, replacement  
5 ☐ Wrecking (If multifamily residential, enter number of units in building in Part D, 13)  
6 ☐ Foundation only  
7 ☐ Roofing (strip or overlay)  
8 ☐ Siding (type \_\_\_\_\_)

**D. PROPOSED USE - For "Wrecking" most recent use**

- |   |  |
|---|--|
| Residential   | Nonresidential   |
| 12 <input type="checkbox"/> One family  | 18 <input type="checkbox"/> Amusement, recreational        |
| 13 <input type="checkbox"/> Two or more family - Enter number of units ----->                   | 19 <input type="checkbox"/> Church, other religious        |
| 14 <input type="checkbox"/> Transient hotel, motel, or dormitory - Enter number of units -----> | 20 <input type="checkbox"/> Industrial                     |
| 15 <input type="checkbox"/> Garage - Carport - Shed (size)                                      | 21 <input type="checkbox"/> Parking garage                 |
| 16 <input type="checkbox"/> Fence (size and type)   | 22 <input type="checkbox"/> Service station, repair garage |
| 17 <input type="checkbox"/> Other - Specify _____   | 23 <input type="checkbox"/> Hospital, institutional        |
|   | 24 <input type="checkbox"/> Office, bank, professional     |
|   | 25 <input type="checkbox"/> Public Buildings               |
|   | 26 <input type="checkbox"/> Signs                          |
|   | 27 <input type="checkbox"/> Stores, mercantile             |
|   | 28 <input type="checkbox"/> Tanks, towers                  |
|   | 29 <input type="checkbox"/> Other - Specify _____          |

**B. OWNERSHIP**

- 9 ☐ Private (individual, corporation, nonprofit institution, etc.)  
10 ☐ Public (Federal, State or local government)

**C. COST**

10. Cost of improvement ..... \$  
To be installed but not included in the above cost  
a. Electrical .....  
b. Plumbing .....  
c. Mechanical .....  
d. Other (elevator, etc.) .....

11. TOTAL COST OF IMPROVEMENT \$

(Omit cents)

**C-2 FEE CHARGED & PAID**

Building \_\_\_\_\_  
Occupancy \_\_\_\_\_  
Plumbing \_\_\_\_\_  
Mechanical \_\_\_\_\_  
Electrical \_\_\_\_\_  
Zoning \_\_\_\_\_  
Other \_\_\_\_\_  
Total \_\_\_\_\_  
Receipt No. \_\_\_\_\_

Nonresidential-Describe in detail proposed use of buildings, e.g., garage, office building industrial plant. If use of existing building is being changed, enter proposed use.

**ALL IMPROVEMENTS MUST CONFORM TO BOCA BUILDING, PLUMBING, AND MECHANICAL CODE AND NATIONAL ELECTRIC CODE. ACT 222 ENERGY CONSERVATION REQUIREMENTS MUST BE MET.**

**III. A PRINCIPAL TYPE OF FRAME**

- 30 ☐ Masonry (wall bearing)  
31 ☐ Wood frame  
32 ☐ Structural steel  
33 ☐ Reinforced concrete  
34 ☐ Other - Specify \_\_\_\_\_

**B TYPE OF SEWAGE DISPOSAL**

- 40 ☐ Public or private company  
41 ☐ Private (septic tank, etc.)

**D DIMENSIONS**

48. Number of stories .....  
49. Total square foot of improvement .....  
50. Total square feet of floor area, all floors, based on exterior dimensions .....  
51. Total land/lot area, sq. ft. ....

**C TYPE OF WATER SUPPLY**

- 42 ☐ Public or private company  
43 ☐ Private (well, cistern)

**E NUMBER OF OFF-STREET PARKING SPACES**

52. Enclosed .....  
53. Outdoors .....

PERMIT NO. \_\_\_\_\_

STREET \_\_\_\_\_

T.M.P. NO. \_\_\_\_\_



**IV. IDENTIFICATION** — *To be completed by all applicants*

	Name	Mailing address — Number, street, city and State	ZIP Code	Tel. No.
1. Owner or Lessee				
2. Contractor			Builder's License No.	
3. Architect or Engineer				
Management Approval (where required)				
Signature of Contractor		Address	Application Date	
Signature of Owner		Address	Date	

**DO NOT WRITE BELOW THIS LINE****V. ADDITIONAL PERMITS REQUIRED OR OTHER JURISDICTION APPROVALS**

Permit or Approval	Check	Date Obtained	Number	By	Permit or Approval	Check	Date Obtained	Number	By
BROILER					PLUMBING				
CURB OR SIDEWALK CUT					ROOFING				
ELEVATOR					SEWER				
ELECTRICAL					SIGN OR BILLBOARD				
FURNACE					STREET GRADES				
GRADING					USE OF PUBLIC AREAS				
OIL BURNER					WRECKING				
OTHER _____					OTHER _____				

**VI. VALIDATION**Building and Zoning  
Permit Number \_\_\_\_\_Building and Zoning  
Permit issued \_\_\_\_\_ 19 \_\_\_\_\_Building and Zoning  
Permit Fees \$ \_\_\_\_\_

Certificate of Occupancy \$ \_\_\_\_\_

Building  
Approved by: \_\_\_\_\_

Plan Review Fee \$ \_\_\_\_\_

**FOR DEPARTMENT USE ONLY**

Construction Type \_\_\_\_\_

Use Group \_\_\_\_\_

Fire Separation \_\_\_\_\_

Live Loading \_\_\_\_\_

Occupancy Load \_\_\_\_\_

TITLE



VII ZONING PLAN NOTES AND APPROVAL		
DISTRICT		
USE		
FRONT YARD		
SIDE YARD		SIDE YARD
REAR YARD		
NOTES		
ZONING APPROVAL.		FLOOD ZONE
		DATE
		YES NO

VIII. PLOT PLAN. For Applicant use.

A large grid for a plot plan, with a north arrow indicator on the right side.



## NOTES and Data



# 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](http://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.