Penns Valley Code Enforcement Agency

225 East Main Street
P.O. Box 357
Millheim, Pa 16854

Phone : 814-349-8177
Fax : 814-349-8017
Email : Info@PVCode.org
PennsValleyCode.com

Permit #

Building Permit Application Requirements- New Construction & Additions- Zoning, Highway Occupancy, Water & Sewer Permits, plus two sets of plans. Other Work- two sets of plans ***and*** may need Zoning, Water and/or Sewer Permits

Address- *Must be obtained* from Centre County 911 ***within 72 hours*** of permit application.
811- PA One Call- prior to any digging *PA One Call Serial #* _____

Work Location-

_____, PA _____. _____ _____
Address Zip Tax Parcel# Municipality

Permit Type	***Residential***	***Solar Panels***	***Pool or Hot Tub***	***Accessory Structure***
☐ Building ☐ Zoning ☐ Demolition ensure utilities are disconnected	☐ Stick Built ☐ Modular ☐ Mobile Home ☐ New, ☐ Used	☐ Roof Mounted ☐ Ground Mount ☐ Other-_____ *Zoning Permit May be required*	☐ Inground ☐ Above Ground ☐ Hot tub	☐ Garage ☐ Attached, ☐ Unattached ☐ Shed/Gazebo/Barn ☐ Other ☐ Retaining Wall (>4' high) ☐ Fence (>6' tall)

Project Value
$

Non-Residential-
_____
Proposed Use

Square footage	***Driveway***	***Deck/Patio***	***Water Supply:***	***Sewage System:***
(includes basement attic & Garage) _____	☐ New Stone ☐ New Asphalt or concrete ☐ Other	☐ Attached to House ☐ >30" Above Ground ☐ Hot tub	☐ Public Water ☐ Well *(Well Permit needed Miles Twp only)*	☐ Public- ☐ Permission attached ☐ Septic- ☐ Copy of Septic permit attached ☐ Other-_____ ☐ Copy of Septic permit attached

Notes/Comments

Site Plan Drawing

Use back page

Setbacks:

	Actual	Required
North		
East		
South		
West		

_____
Owner

_____
Mailing Address

_____
Phone Cell

_____
Email

_____
Contractor

_____
Mailing Address

_____
Phone Cell

_____
Email

Affidavit: I hereby certify that I am the owner in fee or the authorized agent of the owner in fee of the property upon which the work authorized by the permit sought will be performed. All work will be performed in accordance with all applicable laws of the Commonwealth of Pennsylvania and this jurisdiction:

Name _____

Address _____

Signature-_____Date_____

Validation:

Permit # _____

BCO Approval-_____