



# Upper Salford Township

P.O. Box 100  
Salfordville, PA 18958-0100  
610-287-6160

Date Stamp

Permit # \_\_\_\_\_

## MEP PERMIT APPLICATION

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Site Address: \_\_\_\_\_

Subdivision Name and Lot No. (if applicable): \_\_\_\_\_

Estimated Cost of Construction: \_\_\_\_\_

Check appropriate box:  Single Family Dwelling  Addition or Alteration  
 Non-Residential Application: Specify: \_\_\_\_\_

**Scope of Work Description:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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

**All commercial applications must be accompanied by completed plumbing drawings signed and sealed by a licensed architect or professional engineer.**

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

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Inspections Required:

- Rough Mechanical  Final Mechanical  Rough Plumbing  Underslab Plumbing
- Final Plumbing  Electric Service  Electric Rough  Electric Final
- Sprinkler Hydrostatic Test  Final Sprinkler

Application approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Signature

Plan Review \_\_\_\_\_ Permit \_\_\_\_\_ Total Fee \_\_\_\_\_