

PERMIT # _____



C/I

**CITY OF SEAFORD
CODE DEPARTMENT
COMMERCIAL / INDUSTRIAL PERMIT APPLICATION
ALL APPLICABLE INFORMATION MUST BE COMPLETED**

Project Location: _____
Street Address Tax I.D. # City I.D. #

Ownership: (Check one)

- Private Ownership (Individual or Corporation)
- Public Ownership (Federal, State or Local Government)

Current Use: (Check one)

- Residential
- Commercial
- Industrial
- Vacant Lot

Zoning: (Check one)

- R-1 C-1 M-1
- R-2 C-2 M-2
- R-3 C-3
- R-4

Type of Commercial Permit: (Check all that apply)

(Refer to the **COMMERCIAL / INDUSTRIAL PLAN REQUIREMENTS** form for specific requirements.)

- New Building Existing Building - Alteration / Shell Fit Out Deck
- New Shell Building Existing Building - Repair Accessory Building
- Existing Building - Addition Site Work Change in Use or Occupancy

Mayor and City Council:

- Not Applicable
- Review Required - Final Site Plan Approval Received on _____

Board of Adjustment:

- Not Applicable
- Zoning Variance Required
- Special Use Exception Required

Description of Work: _____

Cost of Construction: \$ _____ (Attach Copy of Contract or Written Estimate)

Flood Hazard Zone: (Check one, Enter elevation)

- Zone X - No Certificate Required
- (The following zones require an Elevation Certificate)
- A AO D
- AE AR V
- AH A99 VE _____ Elevation

Model Energy Code Compliance Worksheet:

- Not Applicable
- Required (New Buildings or Existing Building Additions)

Site Plan or Site Survey: (Check One. This is required for all permits. The Site Plan or Survey must show all Existing Structures, New Structures, Right of Ways & Easements. IT MUST BE TO SCALE.)

- Not Applicable - Refer to Site Work Permit # _____
- Attached

Existing Plumbing Fixtures : (Check one)

- Not Applicable
- Yes (List all): _____

Water Service: (The City of Seaford Public Works Department installs water taps up to 2" in diameter on existing water mains owned by the City of Seaford. The tap will be terminated at a curb stop valve. All plumbing work requires a City of Seaford **PLUMBING PERMIT**. All work must be performed by a City of Seaford Licensed Plumber. All Commercial / Industrial occupancies require a water meter and outdoor underground meter pit which meets the City specifications. Licensed

Plumbers may purchase Water Meters & Pits from the City of Seaford at the same time a plumbing permit is issued. Check all that apply.)

- Not Applicable
- Existing Domestic Service _____ (Size)
- New Domestic Service Required _____ (Size)
- New Irrigation Service Required _____ (Size)
- My Plumber will purchase a Water Meter from the City of Seaford. (This fee will be included on the Plumbing Permit.)
- My Plumber will purchase a Water Meter Pit from the City of Seaford. (This fee will be included on the Plumbing Permit.)

Sanitary Sewer Service: (All plumbing work requires a City of Seaford **PLUMBING PERMIT**. All work must be performed by a City of Seaford Licensed Plumber. Check all that apply.)

- Not Applicable
- Existing _____ (Size)
- New Required _____ (Size)

Electric Service: (Check all that apply)

- Not Applicable
 - Existing _____ Amps
 - _____ Volts
 - _____ Phase
 - Temporary Service Requested
 - New Service or Upgrade Requested
- (Fill out and attach an **APPLICATION FOR ELECTRIC SERVICE**. This form must be reviewed and approved by the City of Seaford Electric Department prior to Permit Issuance.)

Below is a list of agency approvals which may be required prior to permit issuance.

STATE OF DELAWARE:

Department of Health and Social Services (DHSS)

Division of Public Health – Office of Food Protection – Plan Review Section (302)-744-4546

- Not Applicable
- Review Required (Public Food Establishment)

Division of Public Health – Health Systems Protection (302)-744-4546

- Not Applicable (No Public Pools)
- Review Required (Public Swimming Pool)

Division of Public Health – Office of Public Drinking Water (302)-741-8630

- Not Applicable
- Review Required (NEW Water Main Installation)

Department of Natural Resources & Environmental Control (DNREC)

Division of Air & Waste Mgmt. - Air Quality Mgmt. Section – Asbestos Mgmt. & Control Program (302) 739-9402

- Not Applicable (All New Construction, No Demolition Activities)
- DNREC / U.S. EPA Notification Form Required (All Renovation Activities)

Division of Air & Waste Management - Boiler Safety (302) 744-2735

- Not Applicable (No boiler, 5 or less dwelling units or NO Mixed Use)
- Inspection required for Boilers and Pressure Vessels. (6 or more dwelling units or Mixed Use Occupancy.)

Division of Soil and Water Conservation - Sussex Conservation District (302) 856-3990

- Not Applicable
- Review Required (New impervious area > or = 5,000 s.f.)

Division of Water Resources – Water Supply Section - Well Head Protection Overlay District

- Not Applicable (No GRA or WHPA on Site.)
- Groundwater Recharge Area (GRA) on Site.
- Well Head Protection Area (WHPA) on Site.

Division of Water Resources - Wetlands and Subaqueous Lands Section (302) 739-9943

- Not Applicable
- Review required (State Wetlands Area on site)

Department of Public Safety

Office of Alcoholic Beverage Commissioner (302) 577-5222

- Not Applicable
- Review required (Any establishment which serves alcoholic beverages.)

Department of Transportation (DeIDOT)

South District Entrance Review: (Some streets in the City of Seaford are owned and maintained by the State of Delaware, Department of Transportation. A DeIDOT entrance permit is required on any state maintained road within the City of Seaford. An entrance permit must be obtained by the property owner before a City of Seaford building permit can be issued. The owner of the property, or authorized agent, is responsible for obtaining this entrance permit.)

- Not Applicable (City Owned Street)
- Required (State Owned Road)

South District Utility Permit: (Some streets in the City of Seaford are owned and maintained by the State of Delaware, Department of Transportation. In order to tie into City water and/or sewer utilities that are located in a state maintained road, a utility permit must be approved by DeIDOT. The City of Seaford is required to apply for this permit on behalf of the property owner. The property owner must have an on-site meeting with the Building Official and Superintendent of Public Works. Any issues which may arise at this meeting must be resolved before the City will apply for the DeIDOT utility permit. A building permit cannot be issued until DeIDOT has approved the utility permit. Please contact the Building Official at (302) 629-9173 and the Superintendent of Public Works at (302) 629-8307, to schedule an on-site meeting.)

- Not Applicable (City Owned Street)
- Required (State Owned Road)

Division of Facilities Management

Architectural Accessibility Board (302) 739-5644

- Not Applicable (Privately funded project.)
- Review Required (All government funded project.)

Division of Professional Regulation

Board of Cosmetology and Barbering (302) 744-4500

- Not Applicable
- Review Required (Shops for cosmetologists, barbers, nail technicians, aestheticians, electrologists)

State Fire Prevention Commission

Office of the State Fire Marshal - Technical Services - Building Plan Review (302) 856-5298

- Not Applicable
- Review Required (All Uses except One & Two Family Dwellings)

Office of the State Fire Marshal - Technical Services - Site Plan Review (302) 856-5298

- Not Applicable
- Review Required (All Uses except One & Two Family Dwellings)

UNITED STATES FEDERAL GOVERNMENT:

U.S. Army Corp of Engineers (215) 656-6850

- Not Applicable
- Review Required (Federal 404 Wetland area on site.)

CONTACTS	NAME	ADDRESS	PHONE NUMBER
PROPERTY OWNER			
CONTRACTOR OR BUILDER			
STATE LICENSED ELECTRICIAN			
STATE LICENSED HVACR CONTRACTOR			
DELAWARE REGISTERED ARCHITECT OF RECORD			
DELAWARE REGISTERED ARCHITECT PROVIDING CONSTRUCTION ADMINISTRATION SERVICES			
PROFESSIONAL ENGINEER OF RECORD			

I _____, the Owner or Owner's Authorized Agent (attach letter from owner), agree to the
 Print Name

following items (initial each item below):

- _____ I hereby grant the City of Seaford, and its agents, permission to enter the above referenced property before and after permit issuance to perform inspections at any reasonable time.
- _____ I understand that all debris must be removed from the site and disposed of in a lawful manner.
- _____ I understand that a permit may be denied if the property listed on this application has outstanding Code violations.
- _____ I understand that this structure may not be occupied for its intended use until a FINAL CERTIFICATE OF OCCUPANCY is issued by the City of Seaford.
- _____ I will contact Miss Utility at (811) to locate all existing utilities on site prior to the commencement of work.
- _____ I will contact the Delaware Department of Natural Resources and Environmental Control (DNREC) 7 to 10 days in advance of any demolition work taking place. I understand that DNREC, under the direction of the U.S. Environmental Protection Agency (EPA), requires an inspection of all materials being demolished for the purpose of identifying any hazardous materials. (302) 739-9402.
- _____ I will obtain a SUSSEX COUNTY BUILDING PERMIT (302-855-7824) prior to the start of construction.
- _____ I understand that if a PERMIT is issued after this application, it should only be construed as a license to proceed with the work and should at no time be construed as authority to violate, cancel, alter or set aside any code, ordinance or regulation. I will comply with all codes, ordinances and regulations of the City of Seaford, Sussex County Delaware, State of Delaware and the U.S. Federal Government.
- _____ I understand that any deviation from the information provided on this application, or from anything shown on the approved plans or other documents submitted, may be grounds for the Building Official to revoke any permit issued and/or denial of the issuance of any CERTIFICATE OF OCCUPANCY.

Signature: _____

Date: _____

CITY OF SEAFORD USE ONLY:

Pre-Permit Site Inspection Performed by: _____ Date: _____

Notes: _____

Building Setbacks Actual: N/A, F____, S____, R____ **Lot Coverage:** N/A, Code Maximum % _____, Actual% _____

Plan review performed by: _____ Date: _____ Building Permit # _____ Date Issued: _____