



Application for Building Permit

COMMERCIAL CONSTRUCTION

Call Miss Utility before you dig: 1.800.282.8555

Permit # _____

JOB SITE:

No. _____ Street _____ Suite _____
Lot No. _____ Subdivision _____ Phase _____

IDENTIFICATION:

Applicant _____ Phone No. _____
(Address) _____

Owner _____ Phone No. _____
(Address) _____

Contractor _____ Phone No. _____
(Address) _____
_____ License No. _____

I, the undersigned, own or act as agent for the owner of the above-referenced property.

Print Name _____ Date _____

Signature _____

DESCRIPTION OF PROPOSED CONSTRUCTION:

- Commercial building _____ Building Area
 Tenant Fit-out _____
 Commercial Addition _____ Total Floor Area
 Commercial Renovation _____
 Sign _____ No. of Stories
_____ No. of Bathrooms

Total Cost of Improvement \$ _____

ZONE _____

CURRENT USE _____

PROPOSED USE _____

Foundation

- Slab on Grade
 Crawl Space
 Basement
 Piers/Pilings

Framing

- Wood
 Metal
 Masonry
 Concrete

Building Systems

- New Plumbing
 New HVAC
 Elevator (Cert. Req'd)
 Sprinkler System

Water

- CWSWA
 Tidewater
 Other

Sewage

- CWSWA
 Kent County
 Other

TECHNICAL SITE DATA: Three (3) full sets of professionally sealed construction plans are required for all new construction.

DESCRIPTION OF MATERIALS:

TOWN OF CAMDEN REQUIREMENTS

CONTRACTORS: The contractor of record as well as all sub-contractors shall acquire a Town of Camden Business License from the Finance Administrator. A current State of Delaware Business License and current Certificate of Liability shall also be required in addition to the license fee, payable via check, Visa, Master Card, Discover Card or Cash. (Applications may be found on the website, www.townofcamden.com or by visiting Town Hall.)

NOTE: To avoid a cease desist order, please ensure all contractors on site are licensed

ADDITIONAL REVIEWS: The Town of Camden acknowledges review of applications may require review by additional authorities and/or agencies. Attached is a list of additional agency contact numbers. It is the responsibility of the applicant to ensure review by all required agencies as well as receipt of agency approvals by the Town of Camden Land Use Department prior to commencement of any work. The applicant shall also be responsible for scheduling a preconstruction meeting, to be held at the Camden Town Hall, with attendance by ALL agencies involved in the review process as well as all utility companies.

INSPECTIONS: 48 hour notification is required for all inspections, NO EXCEPTIONS.

The following inspections may be required:

- | | |
|---|---|
| <input type="checkbox"/> Footing | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Frame | <input type="checkbox"/> Plumbing |
| <input type="checkbox"/> Rough-in (Insulation) | <input type="checkbox"/> Camden-Wyoming Sewer & Water |
| <input type="checkbox"/> Close-in | <input type="checkbox"/> DeIDOT |
| <input type="checkbox"/> Certificate of Occupancy (CO) for new construction | <input type="checkbox"/> Kent Conservation District |
| <input type="checkbox"/> All other inspections as required by the Inspector | <input type="checkbox"/> Fire Marshall |
| <input type="checkbox"/> (Fee & Application Required) | <input type="checkbox"/> Other _____ |

NOTE: All inspections are scheduled by the Land Use Department by calling 302.697.2299.

SCHEDULING REQUIREMENTS:

- A request made for a.m./p.m. inspection shall be scheduled 48 hours after the request is made
 - Cut off for calling in inspections requests is 3:30 p.m.
- Cancellation of Inspections
 - A canceled inspection request shall be received 24 hours prior to the scheduled inspection
 - Rescheduling a canceled inspection without 24 hour notice shall be re-scheduled following the above inspection process. A \$75 cancellation/re-inspection fee shall be required prior to placement on the schedule.
- Re-inspections
 - Failed inspections shall res-scheduled following the above inspection process. A \$75 re-inspection fee shall be required prior to placement on the schedule.

FOR OFFICE USE ONLY:

DATE RECEIVED: _____

PERMIT NO. _____

DATE ISSUED: _____

APPROVED _____

DENIED _____ REASON FOR DENIAL _____
