



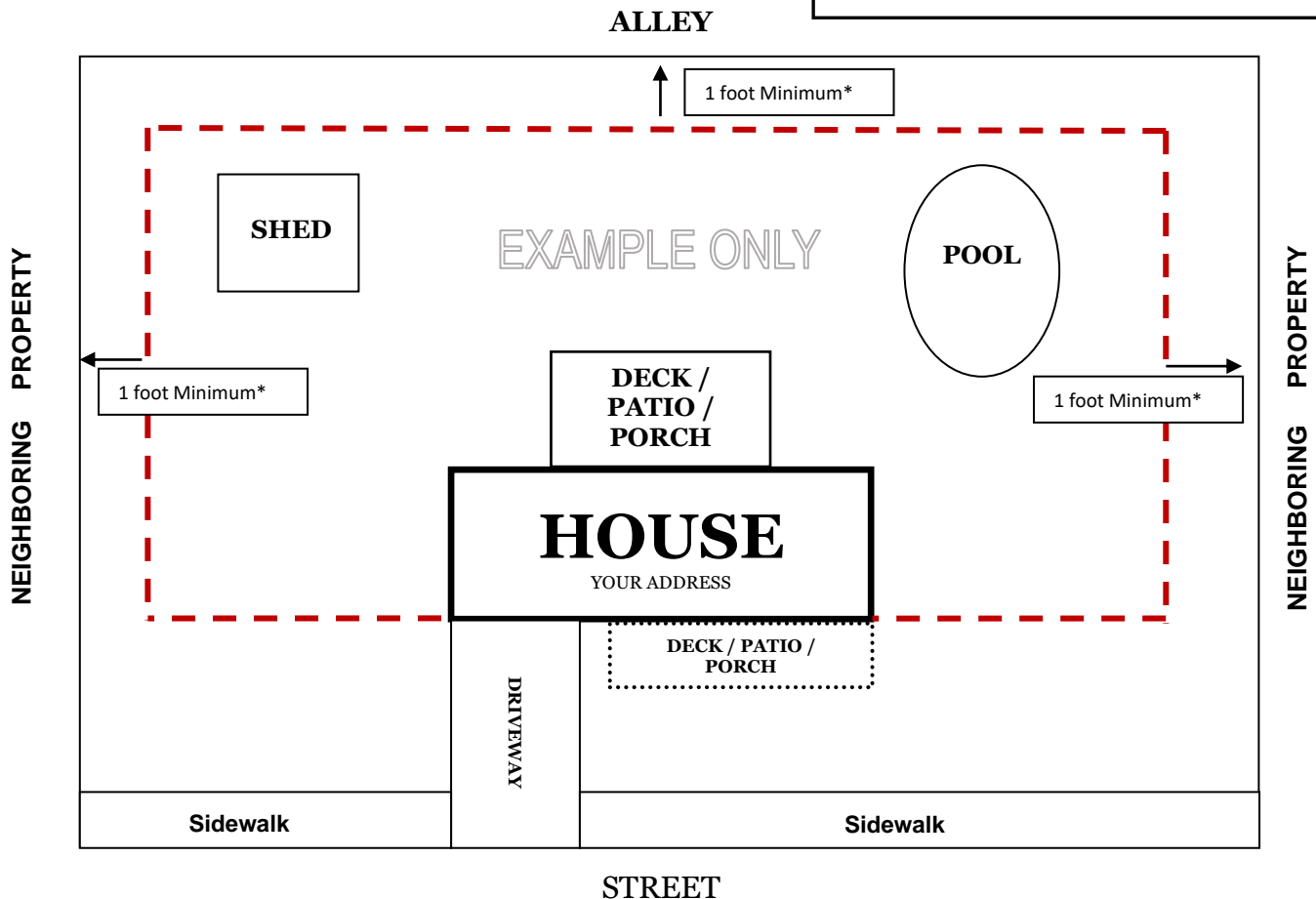
WHITEHALL TOWNSHIP FENCE GUIDELINES



- **A BUILDING PERMIT IS REQUIRED** for all new installations and/or replacements and must be completed **BY CONTRACTOR DOING THIS WORK; OR OWNER, IF NO CONTRACTOR IS INVOLVED.**
(Note: If a contractor is doing installation, proof of workers' compensation coverage is required).
- A detailed site plan must be submitted showing property lines and what surrounds property (i.e. neighbors, streets, alleys), all existing structures on lot (i.e. shed, deck, pool, garage), the location, type and height of proposed fence with the distance from property lines.
- **Please include the estimated cost of construction on the permit application.**
- Maximum Height of Fence: 6' – 00" per Ordinance 1651.
- All finished sides must face out. Cross beams, support posts must always face inside owner's property.
- Fence must be 12" within the owner's property line and may not constitute a vision obstruction within any clear site triangle. To place fence on property line, see Ordinance 2559.
- NO CONSTRUCTION ACTIVITIES MAY RESULT IN SOIL EROSION. This means site must be stabilized at all times, and no mud, earth or dirt may leave the property, and all disturbed areas must be stabilized at all times.
- Barriers to pools and retaining walls require Building Code review, inspection and all associated fees
- **NOTE: NO FENCE SHALL BE ERECTED IN ANY WHITEHALL TOWNSHIP UTILITY OR DRAINAGE EASEMENT, UNLESS FIRST APPROVED BY THE BOARD OF COMMISSIONERS**

** Minimum setback distances vary depending on the zoning district in which you reside in. Any questions, please contact the Zoning Officer at 610-437-5524 Ext. 1155

REMEMBER you MUST call PA One Call (811) before ANY excavation begins!





WHITEHALL TOWNSHIP

Fence Guidelines

For on (or less than 12 inches from) common property line

- ❖ Fences and walls may be located in any front, rear or side yard provided that no fence or wall shall be situate closer than 12 inches to any sidewalk or right-of-way which is open for use by the general public, or closer than 12 inches to any property line. No fence or wall structure may be constructed which constitutes an obstruction within the clear sight triangle, as defined herein. **Fences and similar structures may be erected as a common barrier between adjacent properties only upon all of the following conditions having been met and agreed upon by both property owners:** [Amended 5-9-2005 by Ord. No. 2559]
 - The common boundary(ies) must be surveyed, and field marked by a professional land surveyor, and this surveyed boundary agreed upon by both parties and the surveyed line shall not deviate from the record boundary line;
 - The apportionment of cost for the erection and maintenance of said fence must be agreed upon by all affected parties; and
 - All affected parties must agree and acknowledge that the erection of such fence may affect the owners' property rights under doctrines such as a consentable line; estoppel; and agreement.
 - A document must be recorded in the Lehigh County Recorder of Deeds office reflecting, at a minimum, a record drawing indicating the line as marked, bearing the seal of a registered professional surveyor. Subsection B (1), (2) and (3) above shall be spelled out with sufficient specificity as to identify all parties affected, with such agreement being indexed against all affected properties, and authority to erect such fence being withheld by Whitehall Township until a copy of such said agreement, including the survey, **and proof of recording** is furnished to the Zoning Officer of Whitehall Township.

No. _____

LOCATION OF PROPOSED WORK OR IMPROVEMENT		Zoning District _____
Site Address: _____	Tax Parcel # _____	
Lot # _____	Subdivision/Land Development: _____	Phase: _____ Section: _____

Owner: _____ Phone # _____ Fax # _____

Mailing Address: _____ Email: _____

Occupant/Tenant: _____ Phone # _____ Fax # _____

Mailing Address: _____ Email: _____

Contractor: _____ Phone# _____ Fax # _____

Mailing Address: _____ Email: _____

Architect: _____ Phone# _____ Fax # _____

Mailing Address: _____ Email: _____

TYPE OF WORK OR IMPROVEMENT (Check One)	
<input type="checkbox"/> New Building	<input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Relocation
<input type="checkbox"/> Foundation Only	<input type="checkbox"/> Change of Use <input type="checkbox"/> Sprinkler <input type="checkbox"/> Other (Shed, Driveway, Fence, etc.)
Describe the proposed work: _____	
NOTE: If setting up a manufactured home, the following number is also REQUIRED .	
* MANUFACTURED HOUSING BOARD LICENSE # _____	
ESTIMATED COST OF CONSTRUCTION (reasonable fair market value) \$ _____	

DESCRIPTION OF BUILDING USE (Check One)	
RESIDENTIAL	
<input type="checkbox"/> One-Family Dwelling (R-3)	<input type="checkbox"/> Two-Family Dwelling (R-3) <input type="checkbox"/> Multi-Family (R-2) <input type="checkbox"/> Hotels (R-1)
NON-RESIDENTIAL Specific Use: _____ Use Group: _____	
Change in Use <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, Indicate Former: _____	
Maximum Occupancy Load _____ Maximum Live Load _____	

BUILDING/SITE CHARACTERISTICS	
Number of Residential Dwelling Units: _____ Existing _____ Proposed _____	
Mechanical: Indicate Type of Heating / Ventilating / Air Conditioning (i.e. electric, gas, oil, etc.) _____	
Water Service: (Check) <input type="checkbox"/> Public <input type="checkbox"/> Private Sewer Service: (Check) <input type="checkbox"/> Public <input type="checkbox"/> Private	
Does or will your building contain any of the following:	
Fireplace(s): Number _____ Type of Fuel _____ BTU's _____ Type Vent _____	
Elevator/Escalators: <input type="checkbox"/> YES <input type="checkbox"/> NO	Lifts/Moving Walks: <input type="checkbox"/> YES <input type="checkbox"/> NO
Sprinkler System: <input type="checkbox"/> YES <input type="checkbox"/> NO	Pressure Vessels: <input type="checkbox"/> YES <input type="checkbox"/> NO
Refrigeration Systems: <input type="checkbox"/> YES <input type="checkbox"/> NO	

Permit No. _____
Address _____

BUILDING DIMENSIONS

Existing Building Area: _____ sq. ft.
Proposed Building Area: _____ sq. ft.
Total Building Area: _____ sq. ft.

Number Of Stories: _____
Height of Structure Above Grade: _____ ft.
Area of the Largest Floor: _____ sq. ft.

FLOODPLAIN (This section is REQUIRED to be completed)

Is the site located within an identified flood prone area? (Check One) YES NO

What Zone? (Check One) _____ A _____ AE _____ X

Will any portion of the flood prone area be developed? (Check One) YES NO

Owner/Agent shall verify that any proposed construction activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3 (d). Fair Market Value of Structures \$ _____

******Start of work must commence within 180 days from the issuance of permit ******

PROPERTY OWNER CERTIFICATION

I, the owner/lessee of the property subject of this building permit do hereby acknowledge that it is my sole responsibility to be certain the exact location of my property lines, as well as any Flood Hazard areas, other covenants, deed restrictions, easements or rights of way encumbering same (as shown on my deed); and by submitting this permit application am certifying that all proposed construction will be in accordance to all required setbacks, based upon my property location.

PROPERTY OWNER SIGNATURE _____ **PRINT NAME** _____

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be made by the owner or lessee of the building or structure only if there is no contractor involved, or agent of either, or by the registered design professional employed in connection with the proposed work.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE of Property Owner

Print Name of Property Owner

SIGNATURE of Authorized Agent/Contractor

Print Name of Authorized Agent/Contractor

Contractor Address

Date

Directions to Site: _____

FOR CODE ADMINISTRATOR USE ONLY

ADDITIONAL PERMITS / APPROVALS REQUIRED:

<input type="checkbox"/> STREET CUT/DRIVEWAY	APPROVED _____
<input type="checkbox"/> CUT AND FILL	APPROVED _____
<input type="checkbox"/> PENNDOT HIGHWAY OCCUPANCY	APPROVED _____
<input type="checkbox"/> DEP FLOODWAY OR FLOODPLAIN	APPROVED _____
<input type="checkbox"/> SEWER CONNECTION	APPROVED _____
<input type="checkbox"/> ON-LOT SEPTIC	APPROVED _____
<input type="checkbox"/> ZONING	APPROVED _____
<input type="checkbox"/> HARB	APPROVED _____
<input type="checkbox"/> OTHER _____	APPROVED _____

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

Type of document:	Submitted	Signed & Sealed	Date:	Revision Date:
Foundation Plans	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Construction Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Electrical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Mechanical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Plumbing Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Workers Comp Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No		_____	_____

APPROVALS:

BUILDING PERMIT DENIED: Date _____ Date Returned _____

BUILDING PERMIT APPROVED: _____ Date _____

ZONING / CODE ADMINISTRATOR _____

Date Issued _____ Date of Inspection _____

BUILDING PERMIT FEE _____ SPRINKLER PERMIT FEE (if appl.) _____

PLAN REVIEW FEE (if appl.) _____ ZONING PERMIT FEE (if appl.) _____

TOWNSHIP FEE _____ APPLICATION FEE (if appl.) _____

PA STATE UCC FEE _____ OTHER _____

TOTAL DUE \$ _____

NOTES:

**SITE OR PLOT PLAN – FOR APPLICANT USE – SHOW ALL PROPERTY LINES -LABEL STREETS AND ALLEYS-
ALL EXISTING STRUCTURES**

