UPPER ALLEN TOWNSHIP
OPERATIONAL PERMIT APPLICATION
Community Development Department
100 Gettysburg Pike
Mechanicsburg, PA 17055
Phone: 717-766-0756  Fax: 717-796-9833
Office Hours: M-F 8:00 AM - 4:30 PM
www.upperallentwp.org

FOR OFFICE USE ONLY:
APP COMPLETE: □Y □ N  RETURNED: □Y □ N  PERMIT #:

Site Address: ____________________________  Parcel ID: ____________________________
Applicant Name: ____________________________ Address: ____________________________
Phone: __________________ Fax: __________________ Email: __________________
Owner Name: ____________________________ Address: ____________________________
Phone: __________________ Fax: __________________ Email: __________________

Subdivision: ____________ Lot: ____________ Lot Size: ____________
Building Construction: ____________ Use Group: ____________ Sprinklers: □ Y / □ N  Alarms: □ Y / □ N

PURPOSE/DESCRIPTION OF WORK: ____________________________________________

INSTRUCTIONS

• Clearly print or type information. Incomplete applications will be returned.
• All applications must include a building sketch showing the building layout.
• A dimensional plot plan is required for tents and outside storage/sale of items.
• A Zoning Permit is required to erect a tent. Tents must conform to safety standards per IFC Chapter 24.
• If applicable, a complete list of items for sale must be provided along with manufacturer’s safety sheet.
• No operation may occur until a permit is issued and released by Upper Allen Township.
• Retail sale of fireworks must comply with the IFC Chapter 33 and NFPA 1124.
• All applications are subject to review by a Building Code Official and Zoning official.

FEES

• Churches & Schools: $35/Building - First Permit - $10 Each Additional Building
• Commercial Buildings: $50/Building - First Permit - $10 Each Additional Building

NOTE: FEES ARE SUBJECT TO CHANGE AT ANY TIME BY RESOLUTION FROM THE BOARD OF COMMISSIONERS

Applicant’s Signature: ____________________________  Date: ____________________________
Owner’s Signature: ____________________________  Date: ____________________________