Permit # _____

TOWN OF BERKLEY

NEW HOME PERMIT REVIEW SHEET

Property Address: _____

Flood Zone: _____ DEP File #: _____

Structure Type, Model/Style: _____ Owner to Occupy? Yes No

Dimensions: Width _____ Length _____ Height (ground to peak) _____ Area (sq ft) _____

_____ _____

_____ _____

_____ _____

# of Bedrooms: _____ # of Baths: _____

Ground Water Elevation: _____ Perc Rate (MPI) _____ Septic Design (GPD) _____

Type of Garage: _____ Size of Garage (sq ft): _____ Breezeway Size (sq ft): _____

# of Decks: _____ Size of Decks (sq ft): _____

# of Fireplaces: _____ Type: _____ # of Flues: _____ Flue Type: _____

# of Chimneys: _____ Type: _____ Height: _____

Building Materials

Size:

Footings _____ Foundation _____ Slab _____ Pour Strength (psi): _____ Sills (PT) _____

Anchors _____ Girders _____ Joists _____ Rafters _____ Studs (Ext) _____

Sheathing Dim: Roof _____ Walls _____ Sub Floor _____

Sheathing Type: Roof _____ Walls _____ Sub Floor _____

Ventilation Type (Ratio 1:150) Check Off Ridge _____ Soffit _____ Gable _____

Roof Pitch _____ Roof Cover _____ Overhang _____

Siding Type _____

Stairs: Rise _____ Run _____ Width (finished) _____ Stringer Size _____

Ceiling Height over Nosing _____