



**CITY OF LEWES**  
**BUILDING PERMIT APPLICATION**  
**NEW CONSTRUCTION**

**PLEASE NOTE CHANGE:** A copy of the signed contract between the property owner and the contractor needs to be included when the application is submitted to the city.

**APPLICANT INFORMATION**

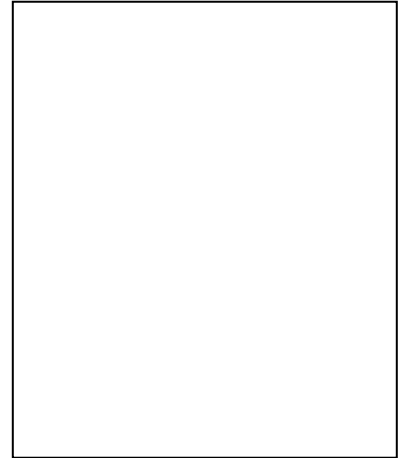
NAME \_\_\_\_\_ PHONE # \_\_\_\_\_

ADDRESS \_\_\_\_\_

**PROPERTY OWNER(S) INFORMATION**

NAME(S) \_\_\_\_\_

ADDRESS \_\_\_\_\_



**PROPERTY INFORMATION**

STREET NAME \_\_\_\_\_ HOUSE NO. \_\_\_\_\_ LOT NO. \_\_\_\_\_

TAX MAP NO. 3.35- \_\_\_\_\_ PARCEL NO. \_\_\_\_\_ TRANSFER DATE: \_\_\_\_\_

LEWES BEACH ONLY ~ DNREC APPROVAL: \_\_\_\_\_ DATE: \_\_\_\_\_

**CONTRACTOR INFORMATION**

CONTRACTOR(S) NAME: \_\_\_\_\_

*(NOTE: ALL SUBCONTRACTORS ARE REQUIRED TO HAVE A VALID CITY OF LEWES BUSINESS LICENSE.)*

CITY BUSINESS LICENSE NO. \_\_\_\_\_ COMPLETION DATE \_\_\_\_\_

TOTAL CONSTRUCTION / PROJECT COST PER CONTRACT \$ \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

===== [FOR OFFICE USE ONLY] =====

(New construction less \$10,000) \_\_\_\_\_ (Renovations less \$10,000) \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_ BldgTransferTax (1%): \$ \_\_\_\_\_ TransferTax (1/2%): \$ \_\_\_\_\_  
Acct.422 Acct. 403 Acct.14404

BLDG. PERMIT # \_\_\_\_\_ PAYMENT RECEIPT# \_\_\_\_\_

**A CITY OF LEWES PERMIT IS REQUIRED PRIOR TO APPLYING FOR A SUSSEX COUNTY PERMIT.**

**A SUSSEX COUNTY PERMIT IS ALSO REQUIRED PRIOR TO WORK COMMENCING**

**\* MECHCHECK MAY BE SUBMITTED IN LIEU OF THE ENERGY CODE COMPLAINEE WORKSHEET. \***

**\*\* AN ORIGINAL CERTIFIED PROPERTY SURVEY MUST ACCOMPANY THIS COMPLETED APPLICATION. \*\***

**CITY OF LEWES ~ ENERGY CODE COMPLIANCE WORKSHEET**

BUILDER NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

BUILDER ADDRESS: \_\_\_\_\_

BUILDER OWNER/LOCATION: \_\_\_\_\_

SUBMITTED BY: \_\_\_\_\_ PHONE: \_\_\_\_\_

CEILING	AREA	INSULATION R-VALUE	SHEATHING R-VALUE
Ceiling	sq ft		
	sq ft		
Raised Trusses	sq ft		
	sq ft		
Stressed-skin Ceiling Panels	sq ft		
	sq ft		

- Wood Framed 16' O.C.                       Metal Framed 16' O.C.                       Concrete/Masonry/Log Wall  
 Wood Framed 24' O.C.                       Metal Framed 24' O.C.                       Stress-skin Wall Panels

WALLS	AREA	INSULATION R-VALUE	SHEATHING R-VALUE
Wall (Total Area of Walls minus total area of windows and doors)			

GLAZING	AREA	U-VALUE
Windows	sq ft	
Glass Doors	sq ft	
Skylights	sq ft	

DOORS	AREA	U-VALUE
	sq ft	
	sq ft	

FLOORS	AREA	INSULATION R-VALUE	SHEATHING R-VALUE
Floor over unconditioned space	sq ft		
Floor over open air	sq ft		

FOUNDATIONS	HEIGHT OF WALL	DEPTH BELOW GRADE	DEPTH OF INSULATION	AREA OR PERIMETER	INSULATION R-VALUE
Basement Wall	feet	feet	feet	sq ft.	
Crawl Space Wall	feet	feet	feet	sq ft.	
Unheated Slab	-----	-----	inches	feet	
Heated Slab	-----	-----	inches	feet	

EQUIPMENT EFFICIENCY (This section may be left blank if no credit will be taken for high-efficiency equipment.)			
Description	Efficiency		Make & Model Number
Heating		AFUE/HSPF	
Cooling		SEER	

CITY OF LEWES REALTY TRANSFER TAX  
DECLARATION FOR BUILDING PERMIT

Building Permit #: \_\_\_\_\_  
Building Permit Value: \_\_\_\_\_

- 
1. Name and Address of Owner of land or building for which building permit is required.  
\_\_\_\_\_  
\_\_\_\_\_
  2. SSN or Federal EIN of person identifies in Item #1. \_\_\_\_\_
  3. Tax Parcel/Property I.D. number and address of realty for which building permit is requested.  
\_\_\_\_\_
  4. Name and address of person applying for building permit *if different from person identified in Item #1*.  
\_\_\_\_\_  
\_\_\_\_\_
  5. SSN or Federal EIN of person identified in Item #4 *if different from Item #2*. \_\_\_\_\_
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IF YOU CLAIM EXEMPTION FROM THIS TAX, PLEASE COMPLETE PAGE 1 AND PAGE 2.  
IF YOU DO NOT CLAIM EXEMPTION, PLEASE COMPLETE PAGE 3.

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6. If you answer "YES" to 6A, 6B, OR 6C, you may stop and sign at Item #9. If you answer "NO", please continue filling out the form.
  - A. Is the cost of all contracts for all phases of this construction, alteration or addition less than \$10,000? (The total cost must include all contracts entered into after July 20, 1998, and all materials supplies after that date, to the extent such materials are not required to be supplies in a contract entered into before July 20, 1998).  
 YES  NO
  - B. Is this an application by the builder or developer for a building permit in order to construct, alter, or add to a building for resale on land owned by the builder or developer?  
 YES  NO  
  
If YES, enter here your State of Delaware Contractor's License Number: \_\_\_\_\_
  - C. Is this construction totally governed by contracts or agreements entered into before July 20, 1998?  
 YES  NO  
  
For purposes of this from "contract" includes the purchase of goods by the owner of the property. Thus, you must answer NO if you intend to purchase supplies or materials after July 20, 1998, apart from supplies or materials required to be supplies under any agreement or undertaking entered on or before July 20, 1998.
  - D. Is the Building Permit requested for construction or alteration of, or addition to a "building – a structure having a roof supported by columns or walls?  
 YES  NO

If NO, stop here and sign at Item #9 on page 2. If YES, go to Item #7.

7. A.  Please check box if the property has been owned for more than one year prior to entering into a construction contract. **YOU MAY STOP HERE AND SIGN ITEM #9 ON PAGE 2.**

Date on which ownership in realty on which construction, alteration or addition is intended was transferred (settlement date) to owner identified in Item #1. \_\_\_\_\_

- B. Date on which contract for this construction was entered into or labor or materials were first supplied, whichever date occurred earlier. \_\_\_\_\_

**IF DATE IN ITEM #7B IS LATER THAN ONE YEAR AFTER DATE INDICATED IN ITEM #7A, YOU MAY STOP HERE AND SIGN AT ITEM #9 ON PAGE 2.**

8. Do you claim exemption from this tax on grounds other than those described above? If so, please indicate basis for exemption below. (Subsequent construction is exempt if transfer of realty on which construction is to occur was exempt, but specific basis for exemption must be stated.)

**PLEASE SIGN AT ITEM #9 BELOW. IF YOU CANNOT CLAIM EXEMPTION ABOVE, YOU MUST COMPLETE PAGE 3 AND SECURE VALIDATION OF TAX PAYMENT FROM THE CITY OF LEWES.**

9. Subject to the penalties of perjury, I swear or affirm the foregoing is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

---

Name of Owner(s):

SSN or Federal EIN:

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1. (a) Is the building permit applied for solely for alteration of or addition to an existing building?  
 YES  NO

If "NO", go to Item #2.

If "YES", enter the value at the time of conveyance for realty tax purposes of land and structure on which construction is intended:

\$ \_\_\_\_\_

GO TO ITEM #2

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2. Enter amount of money paid or to be paid under any and all contracts which (a) pertain to all phases of the construction or alteration of, or addition to, the building for which this building permit is sought; and (b) were entered into after July 20, 1998. Include all purchases of supplies to the extent not required under contracts entered into on or before July 20, 1998.

\$ \_\_\_\_\_

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3. (a) Subtract \$10,000 from the amount entered in Item #2 and enter result here:

\$ \_\_\_\_\_

- (b) Multiply the amount entered in Item #3(a) by 1.5% (.015) and enter result here:

\$ \_\_\_\_\_

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**YOU MUST PAY THE AMOUNT ON LINE 3(b) TO THE CITY OF LEWES PRIOR TO BEING ISSUED THE BUILDING PERMIT.**

*NOTE: YOU MAY OWE AN ADDITIONAL AMOUNT AT THE TIME OF APPLICATION FOR CERTIFICATE OF OCCUPANCY.*

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4. Subject to the penalties of perjury, I swear or affirm the foregoing is true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date