

CONSTRUCTION PERMIT INSTRUCTIONS

ALL INFORMATION IS REQUIRED UNDER THE COMMONWEALTH OF PENNSYLVANIA UNIFORM CONSTRUCTION CODE, ACT NO. 45 of 1999

1. Construction permit application (s) are to be completed, signed and dated.
2. Two (2) sets of building plans and/or specifications (if required) are to be submitted with the application for residential construction projects. Three (3) sets of building plans and/or specifications are to be submitted with the application for commercial construction projects. Building plans may be waived at the discretion of the Building Official if work is minor in nature. Information required on building plans is outlined on the "Construction Drawings Requirements" included in this package.
3. If applicable, a site plan (survey) shall be submitted with the application.
4. The Municipality **MUST** sign-off on the Zoning, Historical District and Flood Hazard form.
5. Provide proof of Workers Compensation Insurance or complete the addendum application stating that the work will be done solely by owner or by contractor without any employees.
6. Complete Energy Code Compliance form
7. Sign OSHA Safety Standards Sign-off form
8. Return items 1 thru 7 to the municipality or contact the district inspector.

NOTE: This list is not all inclusive and the Municipality reserves the right to add, delete, and change this requirement list at any time. Additional information may be required by the Municipality in order to approve and issue a permit. You will be notified of all applicable fees per section 401.2. Once the permit fees are paid you will be given the permit placards that are to be placed in the window at the construction site and a list of all required inspections and the names and phone numbers of the inspectors

CONSTRUCTION DRAWINGS REQUIREMENTS

Drawings should be drawn to scale and shall provide the necessary information to verify compliance with the Pennsylvania Uniform Construction Code.

Two (2) sets of building plans and/or specifications shall be submitted for residential construction projects. Three (3) sets of building plans and/or specifications shall be submitted with the application for commercial construction projects.

All construction drawings shall include the following information:

- **Site Plan Drawing:** The construction documents submitted with the application for permit shall be accompanied by a site plan showing the size and location of new construction and existing structures on the site and distances from lot lines. In the case of demolition, the site plan shall show construction to be demolished and the location and size of existing structures and construction that are to remain on the site or plot.
- **Structural Drawings:** To include footing construction detail, foundation construction details, framing construction detail, masonry construction detail, wood construction detail, steel construction detail, stair detail and chimney detail as apply.
- **Foundation Drawings:** To include all applicable dimensions including footing sizes with description of reinforcement (if applicable), layout and description of foundation drain system location of all slabs describing thickness of slab, base, reinforcement, vapor barrier and any slopes.
- **Floor Plans:** To include location and sizes of all doors, windows, closets, decks, plumbing fixtures wall and column sizes, thickness and material. Location and type of insulation. To include the use of all areas and means of egress components.
- **Roof Framing Drawings:** To include size, type, location and anchoring of roof trusses.
NOTE: For Pre-Engineered trusses, floor joists and beams, all specifications, bracing and installation instructions must be available at time of inspection.
- **Floor Framing Drawings:** To include same as above, except for floor joists on each floor.
- **Electrical Drawings:** To include all lighting facilities, smoke detectors, GFI and ARC fault protection, outlet box size, electrically operated equipment and electrical circuits required for all service equipment of the building or structure.
- **Mechanical Drawings,** To include size and type of appliances, construction of flues and chimney system, ventilation air provided, fresh air make-up provide and gas shut-off locations.
- **Plumbing Drawings:** To include a plan view and a riser diagram of waste and water piping, pipe sizing, grade of pipe, drainage fixture unit loads on stacks and drains, water distribution design criteria.

CONSTRUCTION PERMIT APPLICATION

DATE APPLICATION RECEIVED: _____

LOCATION OF PROPERTY: _____

LOT & BLOCK OR PARCEL NUMBER: _____

SUBDIVISION: _____

MUNICIPALITY: _____ COUNTY: _____

OWNER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____

BUILDING PERMIT

One Family Dwelling Two Family Dwelling Commercial Use _____

New Construction Alteration Repair Demolition

DESCRIPTION OF CONSTRUCTION: _____

TOTAL SQ. FT. OF CONSTRUCTION: _____ ESTIMATED COST OF CONSTRUCTION: _____

Plan Review Required ARCHITECT/ENGINEER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____ FAX: (_____) _____

BUILDER NAME: _____

DBA: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____ FAX: (_____) _____

APPLICANT IS RESPONSIBLE FOR OBTAINING REQUIRED HIGHWAY OCCUPANCY PERMITS FROM THE PA DEPT. OF TRANSPORTATION AS REQUIRED UNDER SECTION 402 OF THE STATE HIGHWAY LAW (36 P.S. § 670-420). I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT. I HEREBY AGREE THAT ALL APPLICABLE PROVISIONS OF THE MUNICIPALITIES CODES SHALL BE COMPLIED WITH, AS WELL AS THE REQUIREMENTS OF THE MUNICIPAL SEWER AND WATER AUTHORITY WHETHER SPECIFIED OR NOT.

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ACKNOWLEDGES THE SMOKE DETECTOR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AND ADDITION PERMITS.

APPLICANT/AGENT SIGNATURE _____ PRINT NAME _____ DATE _____

**** FOR DEPARTMENT USE ONLY ****

BUILDING PERMIT APPLICATION APPROVED DENIED BUILDING PERMIT FEE \$ _____

BY: _____ PLAN REVIEW FEE \$ _____

DATE: _____ MUNICIPAL FEE \$ _____

PERMIT NO. _____ TRAINING FEE \$ ~~4.00~~ 4.50

TOTAL PERMIT FEE \$ _____

REASON(S) FOR DENIAL: _____

PLUMBING PERMIT

LOCATION OF PROPERTY: _____

MUNICIPALITY: _____ COUNTY: _____

CONTRACTOR SAME AS BUILDER CONTRACTOR: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____ FAX: (_____) _____

PLUMBING SYSTEM New Additional Alterations

TYPE Public Sewer Private Septic

TYPE Public Water Private Well

DESCRIPTION OF WORK: _____

ESTIMATED COST OF MECHANICAL WORK

NO: _____	EQUIPMENT	NO: _____	EQUIPMENT	NO: _____	EQUIPMENT
_____	Water Closet	_____	Urinal/Bidet	_____	Bath Tub
_____	Lavatory	_____	Shower	_____	Floor Drain
_____	Sink	_____	Dishwasher	_____	Drinking Fountain
_____	Washing Machine	_____	Hose Bibb	_____	Water Heater
_____	Fuel Oil Piping	_____	Gas Piping	_____	Hot Water Boiler
_____	Steam Boiler	_____	Sewer Pump	_____	Interceptor/Separator
_____	Backflow Preventer	_____	Greasetrap	_____	Sewer Connection
_____	Water Service Connection	_____	Stacks	_____	Other _____
_____	Other _____	_____	Other _____	_____	Other _____

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APPLICANT/AGENT SIGNATURE _____ PRINT NAME _____ DATE _____

***** FOR DEPARTMENT USE ONLY *****

PLUMBING PERMIT APPLICATION APPROVED DENIED

BY: _____ DATE: _____

PERMIT NO. _____

PLUMBING PERMIT FEE	\$ _____
PLAN FEE	\$ _____
MUNICIPAL FEE	\$ _____
TRAINING FEE	\$ 4.00 4.50
TOTAL PERMIT FEE	\$ _____

MECHANICAL PERMIT

LOCATION OF PROPERTY: _____

MUNICIPALITY: _____ COUNTY: _____

CONTRACTOR SAME AS BUILDER CONTRACTOR: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) _____ FAX: (____) _____

HEATING SYSTEM

New Replacement

FUEL

Gas Oil Electric Solar

TYPE

Hydronic Forced Air

DESCRIPTION OF WORK: _____

ESTIMATED COST OF MECHANICAL WORK: \$ _____

NO:	EQUIPMENT	NO:	EQUIPMENT	NO:	EQUIPMENT
_____	Water Heater	_____	Fuel Oil Piping	_____	Gas Piping
_____	Steam Boiler	_____	Hot Water Boiler	_____	Hot Air Furnace
_____	Oil Tank	_____	LPG Tank	_____	Fireplace
_____	Other _____				

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APPLICANT/AGENT SIGNATURE _____

PRINT NAME _____

DATE _____

**** FOR DEPARTMENT USE ONLY ****

MECHANICAL PERMIT APPLICATION

APPROVED

DENIED

BY: _____ DATE: _____

PERMIT NO. _____

MECHANICAL PERMIT FEE \$ _____

MUNICIPAL FEE \$ _____

TRAINING FEE \$ 4.50

TOTAL PERMIT FEE \$ _____

ELECTRICAL PERMIT

LOCATION OF PROPERTY: _____

MUNICIPALITY: _____ COUNTY: _____

CONTRACTOR SAME AS BUILDER CONTRACTOR: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (____) _____ FAX: (____) _____

TYPE OF ELECTRICAL WORK New Additional Repair/Alterations

UTILITY COMPANY: _____

WORK ORDER NUMBER: _____

DESCRIPTION OF WORK: _____

ESTIMATED COST OF ELECTRICAL WORK

NO:	EQUIPMENT	NO:	SIZE	EQUIPMENT	NO:	SIZE	EQUIPMENT
_____	Luminaries	_____	_____	Amp Service Panel	_____	_____	KW Electric Range Receptacle
_____	Receptacles	_____	_____	AMP Sub-Panels	_____	_____	KW Oven/Surface Unit
_____	Switches	_____	_____	AMP Sub-Panels	_____	_____	KW Electric Water Heater
_____	Detectors	_____	_____	KW Dishwasher	_____	_____	HP/KW Space Heater
_____	Pole Luminaries	_____	_____	HP Garbage Disposal	_____	_____	Kw Electric Dryer Receptacle
_____	Spa /Hot Tub	_____	_____	KW Central A/C Unit	_____	_____	KW Baseboard Heat
_____	Swimming Pool	<input type="checkbox"/>	Above Ground	<input type="checkbox"/>	In Ground		
_____	Other _____						
_____	Other _____						
_____	Other _____						

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT AND ACKNOWLEDGES THE SMOKE DETECTOR REQUIREMENTS INVOLVED WITH ALTERATION, REPAIR AND ADDITION PERMITS.

APPLICANT/AGENT SIGNATURE _____ PRINT NAME _____ DATE _____

*** FOR DEPARTMENT USE ONLY ***

MECHANICAL PERMIT APPLICATION APPROVED DENIED

BY: _____ DATE: _____

PERMIT NO. _____

ELECTRICAL PERMIT FEE	\$ _____
MUNICIPAL FEE	\$ _____
TRAINING FEE	\$ 4.00 4.50
TOTAL PERMIT FEE	\$ _____

ENERGY CODE COMPLIANCE 1 & 2 FAMILY DWELLING ONLY

LOCATION OF PROPERTY: _____

LOT & BLOCK OR PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: _____

SELECT TYPE OF ENERGY CODE COMPLIANCE

REScheck ATTACH COMPLIANCE CERTIFICATE

REScheck SOFTWARE CAN BE OBTAINED AT: www.energycodes.gov

NOTE: - Section N1101.9 of the 2009 International Residential Code requires that: A permanent certificate shall be posted on or in the electrical distribution panel. The certificate shall be completed by the builder or registered design professional. The certificate shall list the predominate R-values of insulation installed in or on ceiling/roof, walls, foundation (slab, basement wall, crawlspace wall and/or floor) and ducts outside conditioned spaces; U-factors for fenestration; and the solar heat gain coefficient (SHGC) of fenestration.

===== OR =====

SIMPLIFIED PRESCRIPTIVE BUILDING ENVELOPE THERMAL COMPONENT CRITERIA

CLIMATE ZONE 5 REQUIREMENTS

FENESTRATION - (WINDOWS)	U-0.35	SKYLIGHTS	U-0.60
CEILING	R-38	WOOD FRAME WALLS	R-20 or R-13 & R-5 a
MASS WALLS	R-13	FLOORS	R-30 b
BASEMENTS	R-10 or R-13 c	SLABS	R-10 - 2 FOOT
CRAWLSPACES	R-10 or R-13 c		

- R-13 & R-5 means R-13 in the walls and R-5 insulated sheathing. Less than 25% corner bracing no insulated sheathing required, over 25% R-2 insulated sheathing required.
- Floor insulation is to fill framing cavity R-19 minimum.
- Either R-10 continuous or R-13 cavity insulation.

SIGN ENERGY COMPLIANCE FORM

My signature on behalf of or as the contractor / applicant for this building permit constitutes that I will comply with energy code as outlined in the Rescheck certificate attached or the climate zone checked above.

APPLICANT/AGENT SIGNATURE

PRINT NAME

DATE

WORKERS' COMPENSATION ADDENDUM

LOCATION OF PROPERTY: _____

LOT & BLOCK OR PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: _____

PART I

The applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):

Certificate of Insurance OR Certificate of Self-Insurance (please attach)

Affidavit of Exemption

PART II

Basis for exemption (check one):

Applicant is an individual who owns the property

Contractor/Applicant is a sole proprietorship without employees

Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.

Please explain: _____

All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act.

Please explain: _____

Other: Please explain: _____

My signature on behalf of or as the contractor / applicant for this building permit constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. §4904 relating to un-sworn falsifications to authorities.

Signature: _____ Title: _____

1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

OSHA SAFETY STANDARDS SIGNOFF

LOCATION OF PROPERTY: _____

LOT & BLOCK OR PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: _____

I AM FULLY AWARE OF THE U.S. DEPARTMENT OF LABOR, OCCUPATION SAFETY AND HEALTH ADMINISTRATION (OSHA) STANDARDS AND UNDERSTAND THAT I MUST COMPLY WITH THESE STANDARDS FOR THE DURATION OF MY CONSTRUCTION PROJECT.

SIGNATURE OF APPLICANT/OWNER

DATE SIGNED

ZONING, HISTORIC DISTRICT AND FLOOD HAZARD SIGNOFF

LOCATION OF PROPERTY: _____

LOT & BLOCK OR PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: _____

OWNER NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____

APPLICANT NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____

- ZONING AND/OR HISTORICAL DISTRICT COMPLIANCE CERTIFICATES WILL BE ACCEPTED IN LIU OF THIS FORM
- APPLICANT/OWNER IS RESPONSIBLE FOR OBTAINING REQUIRED HIGHWAY OCCUPANCY PERMITS FROM THE PA DEPT. OF TRANSPORTATION AS REQUIRED UNDER SECTION 402 OF THE STATE HIGHWAY LAW (36 P. S. § 670-420, AS WELL AS COMPLIANCE WITH THE REQUIREMENTS OF THE MUNICIPAL SEWER AND WATER AUTHORITY WHETHER SPECIFIED OR NOT.

===== FOR MUNICIPAL USE ONLY =====

ZONING SIGNOFF

APPROVED

DOES NOT APPLY

ADDITIONAL COMMENTS: _____

HISTORICAL DISTRICT SIGNOFF

APPROVED

DOES NOT APPLY

ADDITIONAL COMMENTS: _____

FLOOD HAZARD AREA

YES

NO

IF YES COMPLIANCE WITH § 403.62a(d)(1)(2)(3) IS REQUIRED

ADDITIONAL COMMENTS: _____

BY: SIGNATURE: _____ TITLE: _____

PRINT NAME: _____ DATE: _____

PHONE NUMBER: (_____) _____ - _____