

## A Residential Building and Zoning Permit is required prior to the construction of the following:

\*Please check with your Homeowner's Association prior to applying for any building/zoning permits.

1. New Homes
2. Additions to homes, garages (over 1000 square feet cumulative), sheds (over 1000 square feet cumulative), and decks.
3. Garages (Attached, integral, detached garages over 1000 square feet)
4. Porches and Decks (greater than 30" above grade)
5. Deck roof, Porch roof
6. Chimneys and built-in fireplaces
7. Remodeling – Any remodeling or alterations of the house which involves changing the structure or supporting members, such as creating new window or door openings, as opposed to replacing windows or doors.
8. Roof – Changes to the roof (such as adding dormers or in changing from a flat roof to a gable roof)
9. Sheds – Utility sheds and greenhouses (over 1000 square feet)
10. Swimming Pools – In-ground and above ground
11. Spas/Hot tubs – Indoors and outdoors
12. Finished Basements – Permits are required when new walls, doors, windows, bedrooms, or other passageways are created
13. Changes/installations to plumbing/mechanical/electrical – additions to, alterations of, or relocations.

## Climatic and Geographic Design Criteria

Ground Snow Load	Wind Speed (mph)	Seismic Design Category	Subject to Damage From				Winter Design Category	Ice Shield Under-lyment Required	Flood Hazards	Air Freezing Index	Mean Annual Temp
			Weathering	Frost Line Depth	Termite	Decay					
25	90	A	Severe	36"	Mod/Hvy	Slt/Mod	0-20	Yes	FEMA	1500 or less	50

# Approval for a Residential Building Permit Consists of the Following Four (4) Requirements:

\* Please check with your Homeowner's Association prior to applying for any building/zoning permits.

## I. ZONING REGULATIONS / COMPLIANCE

Height and Yard Setback Requirements (Distances from property lines)

- A. PLOT PLAN OR LOT SURVEY – A drawing of the lot that shows its dimensions and bearings, the existing house, or proposed house or new structure and its distance from the property lines.
1. Also shown are the building line and any easements or right-of-ways.
  2. The plot plan makes it possible to determine the distance of any proposed addition or structure to any building line or property line.
  3. It is the responsibility of the Applicant to provide the Plot Plan when making application for a Residential Building Permit.

## II. BUILDING CODES / COMPLIANCE

STRENGTH, STABILITY AND SAFETY OF THE STRUCTURE by regulating the size and spacing of beams, floor joists, headers, roof rafters, etc.

- A. TWO (2) SETS OF CONSTRUCTION DRAWINGS OR BLUEPRINTS must be submitted with the Residential Building Permit Application. Plans shall be drawn to scale and be of sufficient clarity to indicate the nature and extent of the work proposed and conformance to the provisions of this code.
1. Drawings may not need to be prepared by an architect or engineer, but must be drawn clearly, accurately to scale, and with sufficient detail. Sketches and doodles cannot be accepted.
  2. If stressed concrete deck/floor (not supported by the ground) or any construction method which is outside the scope of the code used, drawings and design must be prepared by a **Pennsylvania registered architect or engineer**.
  3. Details that must be shown:
    - a. Footer – size of the footer, which must be below the frost line of thirty-six (36") inches; reinforcing size and spacing as required.
    - b. Foundation wall – size of block, course height, reinforcing as required, and anchor bolts size and spacing.
    - c. Floor joists – size and spacing of floor joists; floor sheathing – type & thickness.
    - d. Walls – Type of construction of walls, such as 2" x 4" wood stud spacing; interior finish, such as 5/8" gypsum board.
    - e. Walls exterior coverings – Exterior covering of walls, such as brick or siding.

- f. Floor or wall beams – size and material of any beam supporting floors or walls.
- g. Doors, windows (headers or lintels) – size and type of header or lintel over any opening such as doors and windows.
- h. Ceiling joists – size and spacing of ceiling joists.
- i. Rafters – size, space of rafters, and type of wood.
- j. Roof or floor trusses – size and spacing of roof or floor trusses; pre-manufactured truss details.
- k. Roof – Pitch or slope of the roof and type of wood sheathing, type of covering shingles, etc.
- l. Elevations – front, side, and rear elevations (if applicable)
- m. Energy requirements (Res-Check calculations – see <www.energycodes.gov> or provide required energy specifications).

**III. RESIDENTIAL BUILDING PERMIT FEES, ZONING APPROVAL FEES, AND ADMINISTRATIVE FEES** are due at time of permit issuance.

- A. BUILDING PERMIT FEE FOR NEW BUILDINGS OR STRUCTURES – The Building Permit fee shall be based upon the estimated cost of construction with respect to new buildings or structures. The estimated cost of construction shall be based on the current permit fee schedule and type of construction factor table published by the ICC.
- B. BUILDING PERMIT FEE FOR RECONSTRUCTION, ALTERATIONS, OR ADDITIONS – When the proposal involves reconstruction, alteration or additions to an existing structure, the permit fee shall be based upon the estimated cost of the physical value of such alterations, additions or repairs.
- C. ZONING APPROVAL – This fee varies by Municipality.

**IV. REQUIRED INSPECTIONS**

- A. Depending on the nature of work performed, a variety of inspections are required. The attached “Required Residential Inspections” sheet is provided at the time of building permit issuance with the appropriate inspections indicated.
- B. Footer inspections may not be scheduled until required fees are paid and permit is issued.

**TRAFFIC IMPACT FEES ARE REQUIRED TO BE PAID BEFORE  
A BUILDING PERMIT IS ISSUED.**

**THE CURRENT FEE IS \$1,426.08**

# 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     Multi Family Dwelling     Commercial Use: \_\_\_\_\_

New Construction     Alteration     Repair     Demolition

DESCRIPTION OF CONSTRUCTION: \_\_\_\_\_

TOTAL SQ. FT. OF CONST: \_\_\_\_\_ ESTIMATED COST OF CONST: \_\_\_\_\_

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. 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

TOTAL PERMIT FEE    \$ \_\_\_\_\_

REASON(S) FOR DENIAL: \_\_\_\_\_

OVER FOR SUBCODE PERMIT

**PLUMBING PERMIT**

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 CONSTRUCTION: \_\_\_\_\_

ESTIMATED COST OF PLUMBING WORK: \_\_\_\_\_

NO.	FIXTURE	NO.	FIXTURE	NO.	FIXTURE
_____	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 _____
_____	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 \*\*\*\*\***

<b>PLUMBING PERMIT APPLICATION</b>	<input type="checkbox"/> APPROVED	<input type="checkbox"/> DENIED	BUILDING PERMIT FEE	\$ _____
BY: _____			PLAN REVIEW FEE	\$ _____
DATE: _____			MUNICIPAL FEE	\$ _____
PERMIT NO. _____			TRAINING FEE	\$ <b>4.00</b>
			<b>TOTAL PERMIT FEE</b>	<b>\$ _____</b>

REASON(S) FOR DENIAL: \_\_\_\_\_

***OVER FOR SUBCODE PERMIT***

# MECHANICAL PERMIT

CONTRACTOR SAME AS BUILDER      CONTRACTOR: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

HEATING SYSTEM     New                                       Replacement                       Electric                       Solar  
 FUEL                       Gas                                       Oil  
 TYPE                       Hydronic                               Forced Air

DESCRIPTION OF CONSTRUCTION: \_\_\_\_\_

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:	_____		_____	

*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 \*\*\*\*\***

<b>MECHANICAL PERMIT APPLICATION</b>	APPROVED	DENIED	BUILDING PERMIT FEE	\$ _____
BY: _____			PLAN REVIEW FEE	\$ _____
DATE: _____			MUNICIPAL FEE	\$ _____
PERMIT NO. _____			TRAINING FEE	\$ <b>4.00</b>
			<b>TOTAL PERMIT FEE</b>	<b>\$ _____</b>

REASON(S) FOR DENIAL: \_\_\_\_\_

# ELECTRICAL PERMIT

CONTRACTOR SAME AS BUILDER      CONTRACTOR: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

TYPE OF ELECTRICAL WORK:     New                                       Replacement                                       Repair /Alterations

UTILITY COMPANY: \_\_\_\_\_  
 WORK ORDER NUMBER: \_\_\_\_\_

DESCRIPTION OF CONSTRUCTION: \_\_\_\_\_

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                       Above Ground                       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 \*\*\*\*\***

ELECTRICAL PERMIT APPLICATION	APPROVED	DENIED	BUILDING PERMIT FEE	\$ _____
BY: _____			PLAN REVIEW FEE	\$ _____
DATE: _____			MUNICIPAL FEE	\$ _____
PERMIT NO. _____			TRAINING FEE	\$ <b>4.00</b>
			<b>TOTAL PERMIT FEE</b>	<b>\$ _____</b>

REASON(S) FOR DENIAL: \_\_\_\_\_

# 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

# ENERGY CODE COMPLIANCE

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](http://www.energycodes.gov)

NOTE: - Section N1101.8 of the 2006 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-19 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

## 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 Signoff 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