A full service provider of PA Uniform Construction Code (UCC) services.

# Uniform Construction Code Permit Package

For

Washington Township
Lycoming County

Local Office contact Information:

142 Main St., P.O. Box 120, Montandon, PA 17850 Phone: 570-524-7742 Fax: 570-524-7746 E-mail: jeffk@light-heigel.com

Additional Information available at our web site: www.light-heigel.com

## **Washington Township UCC Building Permit Application**

### **COMPLETENESS CHECKLIST**

The individual completing the application should use the checklist below to assure that all items are included in the application package. The Building Codes Officer will confirm that the required items have been included within 5 days of receipt.

| Completed Application with applicant's name, signature and date  |  |  |  |  |  |
|--|--|--|--|--|--|
| Project plans and specifications, (including plot plan) with all required information to verify code compliance                |  |  |  |  |  |
| Engineer's Seal on drawings (required for commercial work and special residential situations)                                  |  |  |  |  |  |
| Zoning Permit from Zoning Officer. Contact: Kyle Kehoe (570.524.7742)  |  |  |  |  |  |
| On-Lot Sewage Permit from SEO. Contact: Gene Powlus. (570.594.0952) or GPOWLUS@yahoo.com                                       |  |  |  |  |  |
| OR Letter of intent to serve the project from the public water supplier (if applicable) Supplier: Name of Water Co. at Phone # |  |  |  |  |  |
| Municipal Driveway Permit (for access to local municipality roads)   |  |  |  |  |  |
| OR PennDOT Highway Occupancy Permit (for access to state or federal roads)   |  |  |  |  |  |
| Completed Worker's Compensation Insurance Coverage Form  |  |  |  |  |  |
| Completed Fee Schedule Worksheet   |  |  |  |  |  |
| Municipal Fee (made payable to Washington Township) = \$100.00   |  |  |  |  |  |
| Total Permit Fee enclosed (made payable to Light-Heigel & Associates, Inc.)  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| Completeness Signature of Building Code Official   |  |  |  |  |  |
| Date Submittal Determined Complete   |  |  |  |  |  |

### UNIFORM CONSTRUCTION CODE BUILDING PERMIT APPLICATION

PLEASE PRINT LEGIBLY

### LOCATION OF PROPOSED WORK OR IMPROVEMENT

| County:  | Townsl  | hip, Borough or City:  |  |                            |                             |           |
|--|---|--|--|----------------------------|-----------------------------|-----------|
| Site Address:  |   | City & Zip:  |  |                            |                             |           |
| Subdivision/Land Dev   | velopment & Lot#:   |  | Tax Parcel ID:                           |                            |                             |           |
| Directions to Work S   | Site:   |  |  |                            |                             |           |
|  |   |  |  |                            |                             |           |
|  |   |  |  |                            |                             |           |
| Owner:   |   | Phone:   | Email                                    | l:                         |                             |           |
| Complete Mailing Add   | dress:  |  |  |                            |                             |           |
| Principal Contractor   | r:  |  | Phone:                                   |                            |                             |           |
| Mailing Address:   |   |  |  |                            |                             |           |
| Architect/Designer/E   |   |  |  |                            |                             |           |
| Mailing Address:   |   |  | E  | mail:                      |                             |           |
| The <i>Building Permit</i> a                                   | and Occupancy Pern  | nit should be sent to:   | ☐ Owner                                  | ☐ Contrac                  | ctor (plea                  | se check) |
| Describe the propos  | uilding   | n ☐ Alteration ☐   |  |                            |                             |           |
| ESTIMATED FAIL   | R MARKET VAL  | UE OF CONSTRU  | JCTION \$                                |                            |                             |           |
| BUILDING/SITE (  | CHARACTERIST  | TICS   |  |                            |                             |           |
| Energy: Indi   | ☐ Design b  | n to confirm energy co<br>y Total Building Enve<br>y PA Alternative Res.                             | lope (RESCheck                           |                            | ck or equa                  | d)        |
|  | ☐ Other (sp   | •  |  |                            |                             |           |
| Proposed Bu<br>Total Building<br>FLOODPLAIN<br>Is the site loo | MSIONS ding Area: uilding Area: g Area: cated within an ident | sq. ft.<br>sq. ft.   |  | cture Above                | Grade: _                    |           |
| design 100-y<br>Pennsylvania                                   | vear flood elevation,<br>a Flood Plain Manag                  | ubmit certification that<br>as required in the Na<br>ement Act (Act 166-1<br>ent shall be placed abo | tional Flood Insui<br>978), specifically | rance Progr<br>Section 60. | ram and th<br>.3. All livir | ne        |

Note: The National Flood Insurance Program recommends that residential and non-residential structures be elevated 1.5' above the 100-year flood elevation. Many municipalities have adopted all or part of these recommendations in their zoning ordinances, in which case the most restrictive regulation will apply.

| Lowest Floor Level: |  |
|---------------------|--|
|---------------------|--|

| CONSTRUCTION PLANS AND SPECIFICATIONS  Are construction plans and/or specifications attached, illustrating elevations, floor plans, electrical, plumbing, mechanical layouts, energy code compliance data, design loads and calculations, window and door schedule, typical cross sections, typical footer and foundation details, etc.?  YES NO |
|--|
| SITE PLAN  Is a site plan attached, showing the size and location of the new construction and existing structures on the site and the structure's distance from the property lines?   YES NO   |
| CERTIFICATION AND/OR ACKNOWLEDGEMENT   |
| Application for a permit must be made by the <i>owner</i> or lessee of the building or structure, or <i>agent</i> of either or by the <i>registered design professional</i> employed in connection with the proposed work.   |
| The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and <u>PA Act 45 (Uniform Construction Code)</u> and any additional approved building code requirements adopted by the Municipality.   |
| The property owner and applicant assume the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc.  |
| Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body.   |
| <u>Authorized Agent Acknowledgement</u> – I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as an authorized agent and agree to conform to all applicable regulations set forth by PA ACT 45.   |
| I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.  |
| Signature of Owner or Authorized Agent Print Name of Owner or Authorized Agent   |
|  |

Date

Address, City, State, Zip

### WORKER'S COMPENSATION INSURANCE COVERAGE

All applicants are required to submit evidence of Worker's Compensation Insurance Coverage or an exemption form as directed by PA ACT 44. Complete and attach the Worker's Compensation Insurance Coverage Worksheet on page 13.

**Note:** Contractor may fax or mail Workman's Compensation Insurance Coverage directly to Light-Heigel. Be sure to include the <u>job name</u> on the fax. Fax # 570-385-5788

### WORKER'S COMPENSATION INSURANCE COVERAGE INFORMATION

| A. | The Applicant or Authorized Agent is   |  |  |  |  |
|----|--|--|--|--|--|
|    | A contractor within the meaning of the Pennsylvania Worker's Compensation Law  |  |  |  |  |
|    | ☐ YES ☐ NO   |  |  |  |  |
|    | If the answer is "yes" complete Section B, if "no" complete section C below.   |  |  |  |  |
| В. | Insurance Information  |  |  |  |  |
|    | Name of Applicant  |  |  |  |  |
|    | Federal or State Employer Identification No.   |  |  |  |  |
|    | Applicant is a qualified self-insurer for Worker's Compensation.   Certificate Attached  |  |  |  |  |
|    | Name of Worker's Compensation Insurer  |  |  |  |  |
|    | Worker's Compensation Insurance Policy No Certificate Attached   |  |  |  |  |
|    | Policy Expiration Date:  |  |  |  |  |
| C. | Exemption  |  |  |  |  |
|    | I,, do attest that I will not employ/hire any other persons for the project for which I am seeking a building permit.  |  |  |  |  |
|    | After receipt of the building permit, if I employ any other persons, I will notify this office and provide proof of workers' compensation coverage within three working days.  |  |  |  |  |
|    | I understand that failure to comply, will result in a STOP-WORK order and that such order may not be lifted until proper coverage is obtained, as provided by Section 302(e)(4) of the act of June 2, 1915 (P.J. 736), known as the Pennsylvania Workers' Compensation Act, reenacted and amended June 21, 1939 and amended December 5, 1974 and amended July 2, 1993, Act 44. |  |  |  |  |

# A. Individual Inspections / Residential Additions (> 1000 sf):

| ·   | •                    |         | •       |              |
|---|----------------------|---------|---------|--------------|
| Plan Review   | \$100.00             | =       |         |              |
| Footer Inspection                                   | \$65.00              | =       |         | _            |
| Foundation Inspection                               | \$65.00              |         |         | _            |
| Framing Inspection                                  | \$65.00              |         |         | _            |
| Wallboard Inspection                                | \$75.00              |         |         | _            |
| Rough Plumbing Inspection                           | \$75.00              | =       |         | _            |
| Rough Electrical Inspection                         | \$75.00              | =       |         | <del>_</del> |
| Rough Mechanical Inspection                         | \$75.00              | =       |         | _            |
| Combo Inspections                                   | \$75.00              | =       |         | _            |
| Insulation Inspection                               | \$75.00              | =       |         | _            |
| Final Inspection / COO                              | \$100.00             | = [     |         | <del>-</del> |
| Sub Total (Individual)                              |                      | = .     |         | _            |
| B. SF Home base fee                                 | \$770.00             | = .     |         | _            |
| SF Home >2000 SF but <                              | 5000 SE              | +       |         |              |
| SF EXCEEDING 2000 (X .35)                           | 3000 SF              | т ,     |         | _            |
| SF Home >5000 SF                                    |                      | +       |         |              |
| DO NOT ADD TO ANY OTHER FE                          | E (X .42)            | -       |         | <del>-</del> |
| Sub Total (SF Home)                                 |                      | = .     |         | _            |
| C. Specific Projects:                               |                      |         |         |              |
| Decks & Porches                                     | \$150.00             | _       |         |              |
| In Ground Pool                                      | \$130.00<br>\$125.00 |         |         | _            |
| Above Ground Pool                                   | \$75.00<br>\$75.00   |         |         | _            |
| Pool & Deck   | \$150.00             |         |         | _            |
| Residential Addition (2 story or >                  | · ·                  |         |         | _            |
| Residential Addition (1 story and                   |                      |         |         | _            |
| Residential Addition (> 1000 sf)                    | See Section          |         |         | _            |
| Electrical Service Inspection                       | \$85.00              |         |         |              |
| Manufactured Home (Single)                          | \$200.00             |         |         | _            |
| Manufactured Home (Double)                          | \$300.00             |         |         |              |
| Industrialized Home                                 | \$400.00             |         |         |              |
| Demolition  | \$100.00             |         |         |              |
| Bemonitori  | Ψ100.00              |         |         | <del>_</del> |
| Sub Total (Specific)                                | =                    | -       |         | _            |
| Government Surcharge                                | \$4.50               | =       | \$4.50  |              |
| Total Permit Fee                                    | =                    | -       |         | _            |
| MAKE CHECK PAYABLE TO:<br>FOR OFFICE USE ONLY: CHEC |                      |         |         | BY           |
| Municipal Fee:                                      | = \$100.00           |         |         |              |
| MAKE CHECK PAYABLE TO:                              |                      |         |         |              |
| FOR OFFICE USE ONLY: CHEC                           | K#                   | _ RECEI | IVED ON | BY           |