

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

**Uniform Construction Code** 

# Porch & Deck Permit Application

**Providence Township** 

LOCAL LIGHT-HEIGEL OFFICE CONTACT INFORMATION:

Light-Heigel & Associates, Inc. 930 Red Rose Court, Suite 103 Lancaster, PA 17601 *Attn: Building Codes* Phone: (717) 892-7002 Fax: (717) 892-7020

FOR ADDITIONAL INFORMATION: Website: <u>www.light-heigel.com</u> E-mail: Permits@light-heigel.com

## **Providence Township**

### Lancaster

## **UCC Porch & Deck 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 / Contact: Providence Township
Completed Worker's Compensation Insurance Coverage Form
Completed Fee Schedule Worksheet
Total Permit Fee enclosed payable to Light-Heigel & Associates, Inc.)

Completeness Signature of Building Code Official

Date Submittal Determined	Complete
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# UNIFORM CONSTRUCTION CODE PORCH & DECK PERMIT APPLICATION

PLEASE PRINT LEGIBLY

LOCAT	TION OF PR	OPOSED WORK OF	IMPROVEN	<b>IENT</b>	Tax Pa	arcel #:	
County:	Lancaster	_ Township or Borough:_	Providence T	ownship			
Site Add	ress:			City & Zip:			
Subdivis	ion/Land Deve	lopment:			Lo	ot #:	
Directio	ns to Work Si	te:					
Owner:				_ Phone #:			
Complet	e Mailing Addr	ess:					
Email:				_			
Principa	al Contractor:			F	Phone # _		
Mailing A	Address:			Em	ail:		
		WORK:					
BUILD			og fi	L .			
		uilding Area: ructure Above Grade: _					
	Will any portior If checked yes, design 100-yea Pennsylvania F spaces and me Note: The Nat structures be e	ed within an identified floo n of the flood hazard area applicant must submit ce ar flood elevation, as requi flood Plain Management A echanical equipment shall ional Flood Insurance Pro levated 1.5' above the 100 ese recommendations in t apply.	be developed? rtification that lo ired in the Natio Act (Act 166-19 be placed abov gram recomme 0-year flood ele	(Check one) owest floor elevonal Flood Insu 78), specifically re the 100-year nds that reside vation. Many r	rance Pro y Section r flood ele ential and municipali	ogram and 60.3. All liv vation. non-reside ities have a	the ving ntial adopted
				Lowest Floor	Level:		

3

## **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
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### 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?

🗌 NO

### 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.

*Note:* Contractor may fax or mail Workman's Compensation Insurance Coverage directly to Light-Heigel. Be sure to include the job name on the fax. Fax # (717) 892-7020

Worker's Compensation Insurance Coverage Worksheet attached.

# CERTIFICATION AND/OR ACKNOWLEDGEMENT OF RESPONSIBILITY

Application for a permit shall be made by the *owner* or *lessee* of the building or structure, the *agent* of either, or by the *registered design professional* 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, right-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.

Pennsylvania Act 45, Sections 403.45 & 403.46 requires that a final inspection be performed. <u>A</u> <u>building, structure or facility may not be used or occupied without a certificate of occupancy.</u> Failure to arrange for your final inspection after the project is completed is a violation that will result in possible legal action from your municipality. This action may include a fine of not more than \$1,000.00 in costs for each day the violation exists (Section 903).

Failed/Additional inspections – Permit fees are calculated based on a set number of inspections. In the event that additional inspections are required due to failed inspections, not ready, lack of access, etc., the permit holder will be billed at the full rate for that type of inspection. A Certificate of Occupancy will not be issued until all fees have been paid.

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

Address, City, State, Zip

Date

# 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				
	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.				
	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.

# PORCH & DECK PERMIT FEE SCHEDULE

Please use the following fee schedule. All fees should be submitted with the application. Permit will not be issued until all fees are collected.

Porch/Deck Permit Fee	=	\$250.00	
Government Surcharge	+	\$4.50	
Total Perm	nit Fee =	\$254.50	
TOTAL PERMIT FEE Check made payable to: <i>LIG</i> FOR OFFICE USE C CHECK#			

Payment methods: money order or personal check. All returned checks will be assessed a \$25.00 penalty fee.