## **UNIFORM CONSTRUCTION CODE PERMIT APPLICATION**

## LOCATION OF PROPOSED WORK OR IMPROVEMENT

County:		Municipality:		
Site Address:			City, State, Zip:	
Lot #:	Subdivisi	on/Land Development:_		
Owner:			Phone #:	_Cell #:
Mailing Address	·		E-Mail:	
Principal Contractor:			Phone #:	_Cell #:
Mailing Address	:		E-Mail:	
Architect/Design	er/Engineer		Phone #:	_Fax #:
Mailing Address:		E-Mail:		
Directions to	Site:			
	Building A	ddition	☐ Change of Use ☐	Demolition
			RUCTION: \$	
DESCRIPTION OF BUILDING USE  RESIDENTIAL			NON-RESIDENTIAL (C	
⊔о	ne-Family Dwe	lling	Specific Use: Use Group:	
☐ Two-Family Dwelling			Change in Use:  If YES, Indicate Former	YES NO
BUILDING/SIT Number			Existing,	Proposed
Mechan	nical: Indicate	Type of Heating/Ventilat	ing/Air Conditioning (elec	etric, gas, oil, etc.)
Fireplac	ce(s): Number	Type of Fu	el Type	Vent
Energy:	: Indicate meth	od chosen to confirm en	nergy code compliance	
		Design by Total Buildir	ng Envelope (RESCheck	/ COMCheck or equal)
		Design by PA Alternati	ve Res. Energy Provision	s
		Other (specify)		



Does or will your building contain any Water Service: ☐ Publi		<b>ng:</b> vate	
Sewer Service:		vate	
Elevator/Escalators/Lifts/Movi	ng walks:	☐ YES	□ NO
Sprinkler System:	•	☐ YES	□ NO
Pressure Vessels (water heate		☐ YES	□ NO
Refrigeration Systems(air cond	ditioning):	☐ YES	∐NO
BUILDING DIMENSIONS			
Existing Building Area:	sq. ft.	Number of Sto	
Proposed Building Area:		-	cture Above Grade:ft.
Total Building Area:	sq. rt.	Area of the La	rgest Floor:sq. ft.
FLOODPLAIN			□ v=o □ vo
Is the site located within an identified floo Will any portion of the flood hazard area			
If checked yes, applicant shall submit cer 100-year flood elevation, as required in the Flood Plain Management Act (Act 166-19) mechanical equipment shall be placed at	he National Floo 978), specifically	od Insurance Pro Section 60.3.	ogram and the Pennsylvania All living spaces and
Note: The National Flood Insurance Programmer structures be elevated 1.5' above the 10' or part of these recommendations in their regulation will apply.	0-year flood elev	ation. Many m	unicipalities have adopted all
		Lowest Floor L	.evel:
CONSTRUCTION PLANS AND SPECIFICA	TIONS		
Are construction plans and/or specification plumbing, mechanical layouts, energy control and door schedule, typical cross sections    YES NO	ons attached, illude compliance	data, design loa	ads and calculations, window
SITE PLAN			
Is a site plan attached, showing the size on the site and the structure's distance fr			ction and existing structures
WORKER'S COMPENSATION INSURANCE	E COVERAGE	Ē	
All applicants are required to submit evid exemption form as directed by PA ACT 4 Insurance Coverage Worksheet. (Note: Insurance Coverage directly to Light-Heig Worker's Compensati	lence of Worker 4. Complete ar Contractor may gel)	's Compensation attach the W fax or mail Wor	orker's Compensation kman's Compensation
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## CERTIFICATION AND/OR ACKNOWLEDGEMENT

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 PA Act 45 (Uniform Construction Code) 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			
Address, City, State, Zip	 Date			