LIGHT-HEIGEL & ASSOCIATES, INC.

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

Uniform Construction Code

Sewer Lateral Permit Application

The completed application and required documents may be submitted to the address below.

Light-Heigel & Associates, Inc. 430 East Main Street Palmyra, PA 17078 Fax: 717-838-3820

QUESTIONS?

Phone: (800) 257-2190

E-mail: Permits@light-heigel.com

Additional Information available at our web site:

www.light-heigel.com

Why do I need a PA "UCC permit" when I already have my building permit from the township? The state requires builders to obtain a "state building permit" and the required inspections for most construction projects.

UNIFORM CONSTRUCTION CODE BUILDING PERMIT APPLICATION PLEASE PRINT LEGIBLY

LOCATION OF PROPOSED WORK OR IMPROVEMENT

County:	Municipality					
Site Address:		City, State, & Zip:				
Tax Parcel ID#	Lot #S	Lot #Subdivision/Land Development				
(REQUIRE Directions to Work Site:						
		e #Cell #				
		E-Mail:				
		Cell#				
Mailing Address:	ng Address:E-Mail:					
TYPE OF WORK OR IM	IPROVEMENT					
Sewer Lateral	II TIOVENIENT					
FSTIMATED FAIR MAR	RKET VALUE OF CONS	TRUCTION \$				
		<u> </u>				
BUILDING DIMENSION	<u>S</u>	Ni walang at Otavia a				
Proposed Building Area	a:sq. ft. rea:sq. ft.	Number of Stories:				
Total Building Area:	sq. ft.	Area of the Largest Floor:sq. ft.				
FLOODPLAIN						
Is the site located wit	hin an identified flood hazard e flood hazard area be develo	area? (<i>Check one</i>)				
If checked yes, applic	eant must submit cartification	that lowest floor elevation is at or above the				
design 100-year floor	d elevation, as required in the	National Flood Insurance Program and the				
		66-1978), specifically <i>Section 60.3</i> . All living I above the 100-year flood elevation.				
spaces and mechanic	sai equipment shall be placed	above the 100-year 11000 elevation.				
		ommends that residential and non-residential				
		od elevation. Many municipalities have adopted g ordinances, in which case the most restrictive				
		Lowest Floor Level:				
SITE DI ANI						
SITE PLAN Is a site plan attached	d, showing the size and locati	on of the new construction and existing				
	and the structure's distance f					
□ Y	ES NO					

CERTIFICATION AND/OR ACKNOWLEDGEMENT

Application for a permit must be made by the *owner* or lessee of the building or structure, or *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, 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 also certify that I will bear the responsibility to request a final inspection of the project covered by this permit.

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 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.						

SEWER LATERAL FEE SCHEDULE WORKSHEET

Specific Proje	ects						
Sewer	Lateral	=	75.00	\$75			
SUBTOTAL		=		-			
	able Municipal Fees ntact your Municipality for the fee amount)	+	NONE	-			
State Fee		+	\$4.50	_			
 TOTAL PERMIT FEE 		=	\$79.00	-			
event that a sit	E – Please coordinate inspections so to te requires more than one visit due to rge of \$65/per inspection will be charg	failed in	spection or un	availability of some items, <u>an</u>			
	e made by money order or personal che gional office address on the cover page						
All returned che	cks will be assessed a \$25.00 penalty fe	e.					
In order to ensu	re completeness of your application pac	kage, ple	ase refer to the	following checklist:			
□ C	Completed Application with applicant's name, signature and date						
	Project Sketch – including location of vents, cleanouts (and distances between), total length of lateral measured from house to point of connection to public system						
	Municipal Sewer Permit from Deb Casey						
☐ C	Completed Worker's Compensation Insurance Coverage Form						
□ Ta	Tax Parcel ID number (on application)						
□ N	NO Municipal fee added to Fee Schedule Worksheet						
□ C	Completed Fee Schedule Worksheet						
□ То	Total Permit Fee enclosed (made payable to Light-Heigel & Associates, Inc.)						

The following items should be in place and ready for inspection:

- The lateral should be exposed and pressurized
- Cleanouts and vents should be in place (ACCEPTED SEWER LATERAL DESIGN ATTACHED)
- Septic tanks should be filled with appropriate material and lids crushed
- SEWER AND WATER LINES MUST BE SEPARATED HORIZONTALLY BY AT LEAST 5 FEET OR THE WATER LINE MUST BE LOCATED AT LEAST 1 FOOT (VERTICALLY) ABOVE THE SEWER LINES.

