

CHECK NO _____

DATE RECEIVED _____

EAST DONEGAL TOWNSHIP

190 Rock Point Road
Marietta, PA 17547
Lancaster County

Phone: 717-426-3167

Fax: 717-426-4881

CONSTRUCTION CODE PERMIT APPLICATION

LOCATION OF PROPOSED WORK OR IMPROVEMENT:

Site Address: _____ Tax Parcel # _____

Lot # _____ Subdivision/Land Development: _____ Phase _____

Owner: _____ Phone _____ Fax _____

Mailing Address _____ E-mail _____

Principal Contractor: _____ Phone# _____ Fax _____

Mailing Address: _____ E-mail _____

Subcontractor: _____ Phone# _____ Fax _____

Mailing Address: _____ E-mail _____

Subcontractor: _____ Phone# _____ Fax _____

Mailing Address _____ E-mail _____

Architect: _____ Phone# _____ Fax _____

Mailing Address _____ E-mail _____

Licensed Architect or Engineer in Responsible Charge _____

E-mail _____ Phone# _____ Fax _____

Mailing Address: _____

TYPE OF WORK OR IMPROVEMENT (Check One)

- New Building Addition Alteration Repair Demolition Relocation
- Foundation Only Change of Use Plumbing Mechanical Electrical

Describe the current condition of the property: _____

Describe the proposed work: _____

ESTIMATED COST OF CONSTRUCTION (reasonable fair market value)\$ _____

DESCRIPTION OF BUILDING USE (*Check One*)

RESIDENTIAL

NONRESIDENTIAL

One-Family Dwelling

Specific Use: _____

Two-Family Dwelling

Use Group: _____

Multiple Family Dwelling

Change In Use YES NO

If YES, indicate former: _____

Townhouse Dwelling

Maximum Occupancy Load: _____

Maximum Live Load: _____

ATTACH A COPY OF THE ZONING PERMIT ISSUED BY THE ZONING OFFICER AUTHORIZING THE ABOVE DESCRIBED USE. THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE ZONING PERMIT. IF THE ABOVE DESCRIBED USE OR THE CONSTRUCTION WAS THE SUBJECT OF ANY HEARINGS BEFORE THE ZONING HEARING BOARD, THIS APPLICATION IS NOT COMPLETE WITHOUT A COPY OF THE DECISION OF THE ZONING HEARING BOARD.

Recording reference of subdivision or land development plan: _____

Does the work require an erosion and sedimentation control plan? YES NO

If yes, provide proof that the Lancaster County Conversation District has approved the erosion and sedimentation control plan.

Does the work require installation of a new driveway to access a public street? YES NO

BUILDING/SITE CHARACTERISTICS

Number of Residential Dwelling Units: _____ Existing _____ Proposed

Mechanical: Indicate Type of Heating/Ventilating/Air Conditioning (*i.e. electric, gas, oil, etc*)

Water Service: (*Check*) Private

Public (*If no new construction, attach a copy of the connection permit issued by the public water service provider.*)

Sewer Service: (*Check*) Private (Septic Permit # _____)

Public (*if new construction, attach a copy of the connection permit issued by the public service provider*)

Does or will your building contain any of the following:

Fireplace(s): Number _____ Type of Fuel _____ Type Vent _____

Elevator/Escalator/Lifts/Moving Walks (*Check*) YES NO

Sprinkler System: YES NO

Pressure Vessels: YES NO

Refrigeration Systems: YES NO

Existing Building Area _____ sq. ft. Number of Stories _____

Proposed Building Area _____ sq. ft. Height of Structure Above Grade _____ ft.

Total Building Area _____ sq. ft. Area of the Largest Floor: _____ sq. ft.

FLOODPLAIN

Is the site located within an identified flood hazard area? (*Check One*) YES NO

Will any portion of the flood hazard area be developed? (*Check One*) YES NO N/A

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978) specifically **Section 60.3**

Lowest Floor Level: _____

HISTORICAL DISTRICT

Is the site located within a Historical District established pursuant to Act 167? YES NO

If construction is proposed within a Historical District, a certificate of appropriateness may be required by the Municipality.

Property set forth herein, including land and structures, to determine compliance with the Construction Code and to determine the accuracy of the statements contained herein.

I am aware that I cannot commence excavation or construction until the Township has issued a Construction Code Permit. By signing this Application, I certify that all facts in the Application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of the Township, and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. ss4904 relating to unsworn falsification to authorities.

I expressly acknowledge that the issuance of a Construction Code Permit is based upon the facts stated and representations made in this Application. I expressly acknowledge that the Township may revoke a Construction Code Permit if the use and/or structure for which it has been issued violates any applicable Township, County, State or Federal law or regulation. I also expressly acknowledge that the Township may revoke a Construction Code Permit if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

I acknowledge that the holder of a Construction Code Permit is responsible to insure compliance with all applicable Township Ordinances during and at completion of the work authorized by the Construction Code Permit. I acknowledge that the Township requires a final inspection be performed by the construction code official and that the Township issue a certificate of occupancy before the structure which is authorized by this Construction Code Permit may be occupied. It is my responsibility to insure that this inspection is scheduled and the certificate of occupancy obtained before the structure may be occupied. I acknowledge that if I occupy or permit the occupancy of this structure prior to the issuance of a certificate of occupancy under the Construction Code, I will have committed a violation of the Construction Code and will be subject to the penalties and remedies in the Construction Code Ordinance. I also acknowledge that, if the structure is occupied prior to final inspection, work may have to be removed and re-executed in order that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound hereby, I agree to pay the fee established by the Township for delinquent inspections.

Nothing contained in this Application shall be construed to relieve or limit the obligations of the Applicant to comply with all provisions of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township ordinances or to stop the Township from enforcing Township ordinances, including but not limited to the Zoning Ordinance. I expressly acknowledge that permits and certificates of use and occupancy may be required under the Zoning Ordinance and it is my obligation to obtain all permits and approvals the Zoning Ordinance requires before the structure which is authorized by the Construction Code Permit may be authorized.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Address

Date

Directions to site: _____

(FOR CODE ADMINISTRATOR ONLY)

ADDITIONAL PERMITS/APPROVALS REQUIRED

- | | |
|---|----------------|
| <input type="checkbox"/> SUBDIVISION OR LAND DEVELOPMENT PLAN | APPROVED _____ |
| <input type="checkbox"/> STORM WATER MANAGEMENT PERMIT | APPROVED _____ |
| <input type="checkbox"/> EROSION AND SEDIMENTATION CONTROL | APPROVED _____ |
| <input type="checkbox"/> DRIVEWAY | APPROVED _____ |
| <input type="checkbox"/> PENNDOT HIGHWAY OCCUPANCY | APPROVED _____ |
| <input type="checkbox"/> DEP FLOODWAY OR FLOODPLAIN | APPROVED _____ |
| <input type="checkbox"/> PUBLIC SEWER CONNECTION | APPROVED _____ |
| <input type="checkbox"/> ON LOT SEPTIC | APPROVED _____ |
| <input type="checkbox"/> PUBLIC WATER CONNECTION | APPROVED _____ |
| <input type="checkbox"/> ZONING | APPROVED _____ |
| <input type="checkbox"/> HARB | APPROVED _____ |
| <input type="checkbox"/> OTHER | APPROVED _____ |

APPROVALS

CONSTRUCTION CODE PERMIT DENIED: DATE: _____ DATE RETURNED _____

CONSTRUCTION CODE PERMIT APPROVED: DATE: _____ DATE RETURNED _____

CODE ADMINISTRATOR _____

Date Issued: _____ Date Expires: _____ Permit _____

- | | | |
|---|----------------|-----------------|
| CONSTRUCTION CODE ADMINISTRATIVE FEE | \$50.00 | RECEIPT # _____ |
| CONSTRUCTION CODE STATE TRAINING FEE | _____ | RECEIPT # _____ |
| CONSTRUCTION CODE PLAN REVIEW FEE | \$ _____ | RECEIPT # _____ |
| CONSTRUCTION CODE ESTIMATED INSPECTION FEE | \$ _____ | RECEIPT # _____ |
| CONSTRUCTION CODE ADDITIONAL INSPECTION FEE | \$ _____ | RECEIPT # _____ |
| PLUMBING PERMIT (if applicable) | _____ | RECEIPT # _____ |
| MECHANICAL PERMIT (if applicable) | _____ | RECEIPT # _____ |
| ELECTRICAL PERMIT (if applicable) | _____ | RECEIPT # _____ |

PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

Type of document:	Submitted:	Signed & Sealed:	Date:	Revision Date:
Foundation Plans <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Construction Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Electrical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Mechanical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Plumbing Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Flood Hazard Area Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Workers Comp. Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____

INSPECTION CHECKLIST

(FOR CODE ADMINISTRATOR USE ONLY)

Address: _____ Permit # _____

<u>Required Type</u>	<u>Date</u>	<u>Inspector</u>	<u>Comments</u>
Foundation #1	_____	_____	_____
Foundation #2	_____	_____	_____
Foundation #3	_____	_____	_____
Masonry #1	_____	_____	_____
Masonry #2	_____	_____	_____
Masonry #3	_____	_____	_____
Plumbing #1	_____	_____	_____
Plumbing #2	_____	_____	_____
Plumbing #3	_____	_____	_____
Mechanical #1	_____	_____	_____
Mechanical #2	_____	_____	_____
Mechanical #3	_____	_____	_____
Electrical #1	_____	_____	_____
Electrical #2	_____	_____	_____
Electrical #3	_____	_____	_____
Electrical #4	_____	_____	_____
Framing #1	_____	_____	_____
Framing #2	_____	_____	_____
Framing #3	_____	_____	_____
Wallboard #1	_____	_____	_____
Wallboard #2	_____	_____	_____
Wallboard #3	_____	_____	_____
Final #1	_____	_____	_____
Final #2	_____	_____	_____
Final #3	_____	_____	_____
Temporary C/O			
Date Expires	_____	_____	_____
Certificate of Occupancy	_____	_____	_____

RESIDENTIAL CONSTRUCTION CODE PERMIT APPLICATIONS

Details Required / Please Check List as Applicable

- Yes N/A 1. Footer-size of the footer which must be below the frost line of thirty-six (36") inches; reinforcing size and spacing as required.
- Yes N/A 2. Foundation wall-size of block, course height, reinforcing as required, anchor bolts size and spacing.
- Yes N/A 3. Floor joists-size and spacing of floor joists; floor sheathing-type & thickness.
- Yes N/A 4. Walls-Type of construction of walls, such as 2"x 4" wood stud spacing; interior finish, such as 5/8" gypsum board.
- Yes N/A 5. Walls-Exterior coverings- Exterior covering of walls, such as brick or siding.
- Yes N/A 6. Floor or wall beams-size and material of any beam supporting floors or walls.
- Yes N/A 7. Doors, windows (headers or lintels) - size and type of header or lintel over any opening such as doors and windows.
- Yes N/A 8. Ceiling joists-size and spacing of ceiling joists.
- Yes N/A 9. Rafters-size and spacing of rafters, and type of wood.
- Yes N/A 10. Roof or floor trusses-size and spacing of roof or floor trusses; pre-manufactured truss details.
- Yes N/A 11. Roof - Pitch or slope of the roof and type of wood sheathing, type of covering-shingles, etc.
- Yes N/A 12. Elevations - front, side & rear elevations (if applicable)
- Yes N/A 13. Energy requirements (Res-Check calculations - see< www.energycodes.gov>or provide required energy specifications).

**EAST DONEGAL TOWNSHIP
190 ROCK POINT ROAD
MARIETTA, PA 17547**

**PERMITS AND APPROVALS WHICH MAY BE REQUIRED PRIOR TO ISSUANCE
OF A UNIFORM CONSTRUCTION CODE PERMIT**

Zoning Permit under Zoning Ordinance.

Proof of recording of a subdivision and/or land development plan for all non-residential construction and for construction of any dwelling not on a separate lot of record.

Highway Occupancy Permit if property fronts on a highway under the jurisdiction of the Pennsylvania Department of Transportation and a new access or changed access is required.

Street Opening Permit if property fronts on a Township street and any street openings are required for installation of underground utilities.

Permit to connect to and/or expand the use of public sewer system if public water supply will be used or proposed construction will result in an expansion of such use.

Permit to connect to and/or