

# Permit Application

Number \_\_\_\_\_



Customer Number if known 

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MDIA Office

## Location of Proposed Work or Improvement

Municipality\* \_\_\_\_\_ County\* \_\_\_\_\_

Site Address\* \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision/Land Development \_\_\_\_\_ Phase \_\_\_\_\_ Section \_\_\_\_\_

Owner\* \_\_\_\_\_ Phone #\* \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address\* \_\_\_\_\_ E-Mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Principal Contractor\* \_\_\_\_\_ Phone #\* \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address\* \_\_\_\_\_ E-Mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Architect \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-Mail \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

### Type of Work or Improvement\* (Select all that apply)

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

Describe the proposed work

### Estimated Cost of Construction\* (reasonable fair market value)

a. Structural Cost \$ \_\_\_\_\_  
 Installation(s) not included in above cost \_\_\_\_\_  
 b. Electrical \$ \_\_\_\_\_  
 c. Plumbing \$ \_\_\_\_\_  
 d. Heating, Air Conditioning \$ \_\_\_\_\_  
 e. Other \$ \_\_\_\_\_  
**Total Cost of Project (a+b+c+d+e)** \$ \_\_\_\_\_

Description of Building Use \*(Select One)

Residential

- One-Family Dwelling (R-3)
- Two-Family Dwelling (R-2)
- Multi-Family (R-2)
- Hotels (R-1)

Non-Residential

Specific Use: \_\_\_\_\_  
 Use Group: \_\_\_\_\_  
 Change in Use:  Yes  No  
 If YES, Indicate Former: \_\_\_\_\_  
 Maximum Occupancy Load: \_\_\_\_\_  
 Maximum Live Load: \_\_\_\_\_

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: (Select)  Yes  No

Sewer Service: (Select)  Yes  No Septic Permit # \_\_\_\_\_

Does or will your building contain any of the following:

Fireplace(s): Number \_\_\_\_\_ Type of Fuel \_\_\_\_\_ BTU's \_\_\_\_\_ Type Vent \_\_\_\_\_

Elevator/Escalators/Lifts/Moving walks: (Select)  Yes  No

Sprinkler System:  Yes  No

Pressure Vessels:  Yes  No

Refrigeration Systems:  Yes  No

BUILDING DIMENSIONS

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 Largest Floor: \_\_\_\_\_ sq.ft.

FLOODPLAIN

Is the site located within an identified flood prone area? (Select One)  Yes  No

Will any portion of the flood prone area be developed? (Select One)  Yes  No  N/A

Owner/Agent shall verify that any proposed construction 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 (d).

HISTORIC DISTRICT

Is the site located within a Historic District?  Yes  No

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

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 assumes 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. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall 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.

**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 Date

Directions to Site:

\* Indicates required field.

**READ, UNDERSTAND AND COMPLY WITH THE FOLLOWING NOTICES**

**NOTICE:** In addition to a zoning/construction permit, if the subject property does or will require access to a public road or street, and/or will require improvement/change of existing driveway access to a public road or street. If such public road or street is under the jurisdiction of the Commonwealth of Pennsylvania, you must obtain a Highway Occupancy Permit pursuant to Act no. 428 of 1945, as amended, known as the "State Highway Law", Application for such Highway Occupancy Permit as to a Commonwealth road or street must be made to, with and processed by the Pennsylvania Department of Transportation. If such road or street is under the jurisdiction of North Sewickley Township, you must apply for and obtain a Driveway Permit from the Township.

**NOTICE:** In addition to a zoning/construction permit, you may need to make other applications and obtain other permits for the development you propose, including but not limited to, depending on location of your premises, for an on-lot sewage permit and/or connection to a public sewer connection permit, water connection permit, and/or Land Development approval, prior to being able to commence construction. Further, following construction and prior to placing into use the proposed structure/building, you will need to procure an Occupancy Permit.

**NOTICE:** Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of worker's compensation to North Sewickley Township. Contractor also prohibited by law as to building or remodeling under subject Permit from engaging the services of a subcontractor unless subcontractor maintains workers' compensation insurance coverage as to subcontractor's employees. Failure of Contractor and Applicant for this Permit to maintain worker's compensation insurance according to law of Commonwealth of Pennsylvania, and as to said insurance, naming North Sewickley Township as a named insured, coverage requires stoppage of all construction/work under Zoning/Construction Permit issued and a Zoning/Construction Permit may be revoked.

**NOTICE:** Property owner is responsible for determining if property is subject to private covenants or private plan restrictions and compliance with the restrictions. Private covenants may be more restrictive than zoning/township regulations. Issuance of a building or zoning/construction permit does not constitute compliance with private covenants or restrictions. Permits issued in violation of any private covenants or restrictions are the sole responsibility of the property owner or their authorized representatives.

**STATEMENTS AND VERIFICATION BY APPLICANT**

I do hereby agree to observe and adhere to any and all provisions of the North Sewickley Township Zoning/UCC Code, and do further agree and understand that my failure to do so shall constitute a violation as to any Permit issued per this Application, which violation shall cause any Permit to become Null and Void, and revocable by North Sewickley Township via its Zoning Officer or other designated agent.

I/We hereby certify that as applicants, owners, contractors, agents or others that I/we completed and read the foregoing Application and that the information and statements in this application and other representations contained in all accompanying plans are made a part of this application and are true and correct to the best of my/our knowledge and belief. This statement and verification are made subject to the penalties of 18 P.A.C.S.A. Section 4904 relating to unsworn falsifications to authorities, which provides that if I/We knowingly make false statements of averments, I/We may be subject to criminal penalties. I/We hereby authorize representatives of the township to make required inspections upon the property to verify that the construction requested under this application complies with the North Sewickley Township Zoning Ordinance and other applicable codes.

If applicant is Contractor or Agent of Owner, he/she hereby certifies that he/she has the authority to act on behalf of the Owner.

OWNER(S) \_\_\_\_\_ DATE \_\_\_\_\_  
CONTRACTOR OR AGENT \_\_\_\_\_ DATE \_\_\_\_\_

RECEIVED OF \_\_\_\_\_, THE SUM OF \$ \_\_\_\_\_, FEE FOR THE ABOVE  
NUMBERED BUILDING/ZONING PERMIT APPLICATION. DATED: \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
AUTHORIZED SIGNATURE

ZONING/CONSTRUCTION PERMIT ( ISSUED ) ( DENIED ) ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

[NOTE IF DENIED, LETTER SETTING FORTH REASONS WILL ACCOMPANY DENIAL NOTICE.]

\_\_\_\_\_  
ZONING OFFICER

UNIFORM CONSTRUCTION CODE PERMIT ( ISSUED ) ( DENIED ) ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
BUILDING CODE OFFICIAL

# WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION

5

Please check one of the options below pertaining to your application:

## Option A.

\_\_\_\_\_ Property owner is hiring a Contractor, stating that "Contractor" is within the meaning of the Pennsylvania Workers' Compensation Law - **WORKERS' COMPENSATION INSURANCE MUST BE ATTACHED AND PROVIDED TO THE MUNICIPALITY.**

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## Option B.

### AFFIDAVIT OF EXEMPTION

If one of the reasons below is the owner's situation, this paper **NEEDS TO BE NOTARIZED**. The undersigned affirm that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated: (please check one)

- \_\_\_\_\_ Property owner performing own work. If property owner does hire contractor to perform any work pursuant to building permit, contractor must provide proof of workers' compensation insurance to the municipality. Homeowner assumes liability for contractor compliance with this requirement.
- \_\_\_\_\_ Contractor has no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof on insurance to the municipality.
- \_\_\_\_\_ Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (**COPIES OF RELIGIOUS EXEMPTION LETTERS FOR ALL EMPLOYEES MUST BE ATTACHED AND PROVIDED TO THE MUNICIPALITY**).

\_\_\_\_\_  
Signature of Applicant

Address \_\_\_\_\_

County of \_\_\_\_\_

Municipality of \_\_\_\_\_

Subscribed, sworn to and acknowledged  
before me on this \_\_\_\_\_  
day of \_\_\_\_\_, 20 \_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public

My Commission expires: \_\_\_\_\_

(SEAL)

**APPLICATION FOR ZONING OCCUPANCY PERMIT**

**NORTH SEWICKLEY TOWNSHIP  
893 MERCER ROAD  
BEAVER FALLS, PA 15010**

Certificate No. \_\_\_\_\_

Telephone No. \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

LOT NO. \_\_\_\_\_ IN THE \_\_\_\_\_ PLAN OF LOTS

TAX PARCEL NO. \_\_\_\_\_

PROPOSED USE: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_

APPROXIMATE DATE OF COMPLETION: \_\_\_\_\_

DO YOU NOW OR WILL YOU EVER GENERATE; STORE; TRANSPORT; OR DISPOSE  
OF ANY HAZARDOUS MATERIALS OR WASTE AS DEFINED BY THE U.S.  
ENVIRONMENTAL PROTECTION AT THIS LOCATION:

YES \_\_\_\_\_ NO \_\_\_\_\_

IF YES, PLEASE INDICATE MATERIAL(S) AND QUANTITY ON REVERSE.

I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION IS TRUE AND CORRECT  
AND THAT ALL APPLICABLE PROVISIONS OF THE NORTH SEWICKLEY TOWNSHIP  
ORDINANCES HAVE BEEN COMPLIED WITH:

DATE FILED \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF OWNER/AGENT

DATE ISSUED \_\_\_\_\_

\_\_\_\_\_  
ZONING AND CODES OFFICER

# BUILDING PERMIT RELEASE FORM

North Sewickley Township Sewer Authority  
893 Mercer Road  
Beaver Falls, PA 15010

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Parcel Number: \_\_\_\_\_

Township: \_\_\_\_\_

\_\_\_\_\_

Property Owner Signature

\_\_\_\_\_

Date

**BELOW IS TO BE COMPLETED BY NORTH SEWICKLEY TOWNSHIP SEWER AUTHORITY**

\_\_\_\_\_ The above named person has paid the required tap-in fee and may acquire a building permit from North Sewickley Township.

\_\_\_\_\_ The above named person is not required to pay the tap-in fee and may acquire a building permit from North Sewickley Township.

\_\_\_\_\_ The above property is within the boundaries of the public sewer area and the owner is not intending to use water or public sewers; however, if illegal use of water & sewers is found, the owner will be subject to penalties relating to illegal tap-in and usage as described in the North Sewickley Township Sewer Authority's Rules & Regulations – Section 1 – 15.

\_\_\_\_\_

North Sewickley Township Sewer Authority Signature

\_\_\_\_\_

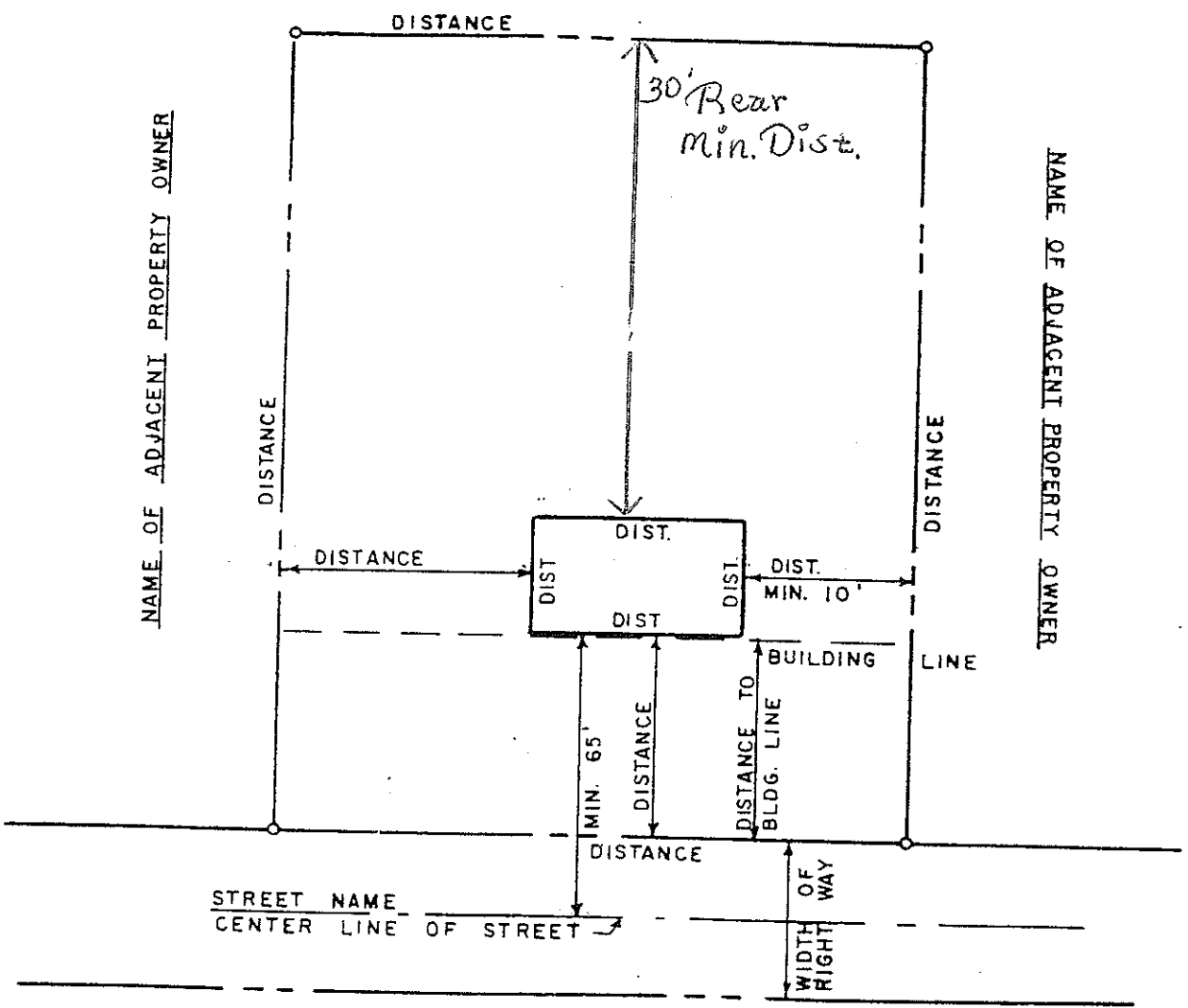
Date

*Example*

NAME OF ADJACENT PROPERTY OWNER

NAME OF ADJACENT PROPERTY OWNER

NAME OF ADJACENT PROPERTY OWNER



WATER SUPPLY  
 WELL    CITY

SEWAGE DISPOSAL  
 SEPTIC    PUBLIC

NAME OF APPLICANT... \_\_\_\_\_

DATE... \_\_\_\_\_

# TYPICAL SKETCH for BUILDING PERMIT



**CUSTOMER ASSISTANCE GUIDE  
BUILDING PERMIT APPLICATION SUBMITTAL REQUIREMENTS**

**DECKS**

- Please read all of the following information.
- The following is a checklist. You must have a "checkmark" in all the sections listed below prior to submitting your application.

\_\_\_\_\_ "Affidavit of Exemption" (See attached form) If you are hiring a contractor to construct your deck, and they have workers' compensation, have the contractor or their insurance carrier provide us with a "Certificate of Insurance" showing proof of such. If the homeowner or a contractor without workers' compensation is constructing the deck, the attached form must be completed and notarized.

\_\_\_\_\_ A site plan showing the proposed deck, the width and length of the deck, the distances in feet, to the front, sides, rear property lines, and the height of floor surface above grade at highest point.

\_\_\_\_\_ Three (3) sets of construction drawings that show in detail code compliance for all of the work proposed, to include but not limited to the following information;

\_\_\_\_\_ Floor joist size, species and grade of wood.

\_\_\_\_\_ Floor joist spacing (16" or center, 24" on center etc:).

\_\_\_\_\_ Span of floor joist (clear distance between supports).

\_\_\_\_\_ Attachment to existing structure (bolts or lags, with sizes and spacing).

- Ledger shall not be supported on brick or stone veneer.

- Flashing detail.

\_\_\_\_\_ Depth of post footing below finished grade. (shall be below frost line).

\_\_\_\_\_ Guardrail height from floor of deck, (36" minimum)

\_\_\_\_\_ Guardrail on stairs (34" minimum measured vertically from nose of tread).

\_\_\_\_\_ Spacing of balusters. (maximum 4").

\_\_\_\_\_ Stairs – Riser height and tread depth. (Rise 8 ¼" maximum depth 9" minimum).

\_\_\_\_\_ Stairs – Handrail height (from nose of tread, minimum 34", maximum 38").

\_\_\_\_\_ Handrail grip size – if circular must have a cross section of 1 ¼" minimum to 2" maximum.

\_\_\_\_\_ Width of stairs (36" minimum)

\_\_\_\_\_ Lateral bracing detail.

\_\_\_\_\_ Please refer to (AWC DCA 2015 – deck guide – 1804.pdf) for wood deck design.

\_\_\_\_\_ Completed building permit application.

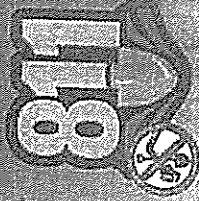
MDIA will review plans submitted to determine code compliance. If the minimum submittal requirements are not met, we will ask the applicant to supply additional information. If the minimum requirements are met, the plans will be marked "approved". A building permit will be issued and the applicant will be notified of the inspection fees and when they can pick-up the permit at the Municipal Building. All fees shall be paid prior to the issuance of the permit. Then use the inspection procedures provided to have all of the required inspections performed.



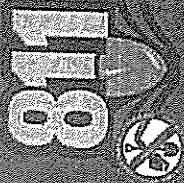
Safe digging is  
no accident!

Know what's  
below.

Dial 8-1-1  
before you dig.



Know what's below.  
Dial 8-1-1 before you dig.



www.pa811.org

#### TEMPORARY MARKING GUIDELINES

WHITE	Proposed Excavation
PINK	Temporary Survey Markings
RED	Electric Power Lines, Cables, Cords and Lighting Cables
YELLOW	Gas, Oil, Steam, Air, Vacuum or Sewer Lines
ORANGE	Communication Lines, Materials, Cables, Conduit and Plastic Pipes
BLUE	Potable Water
PURPLE	Reclaimed Water, Irrigation and Storm Lines
GREEN	Sewers and Drain Lines

The following information is needed when you call PA One Call System.

#### YOUR TELEPHONE NUMBER

**YOUR MAILING ADDRESS**  
**COUNTY** - The name of the county where the work will take place  
**MUNICIPALITY** - City, Township or Borough where the work will take place  
**THE ADDRESS WHERE THE WORK WILL TAKE PLACE**  
**THE NAME OF THE STREET TO BE EXCAVATED**  
**THE NAME OF A SECOND INTERSECTION NEAR THE WORK SITE**

**IS THE PROPOSED EXCAVATION AREA (WORK SITE) MARKED IN WHITE - Yes or No**

**OTHER INFORMATION THAT WOULD HELP THE LOCAL ONE CALL FIND THE SITE -** Clarifying information to assist in locating the site to dig

**THE TYPE OF WORK BEING DONE**  
**WHETHER THE WORK WILL TAKE PLACE IN: Street, Sidewalk, Public or Private Property**

**THE APPROXIMATE DEPTH YOU ARE DIGGING**  
**THE EXTENT OF THE EXCAVATION -** The approximate size of the opening, the length and width and whether the method of excavation - how will the earth be moved

**WHO IS THE WORK BEING DONE FOR**  
**PERSON TO CONTACT IF THE UTILITIES HAVE QUESTIONS**

**THE CONTACT PERSON'S PHONE NUMBER -** The phone number with area code for daytime contact

**THE BEST TIME TO CALL**  
**FAX NUMBER AND/OR EMAIL ADDRESS -** The responses from the facility owners will be sent to you

**SCHEDULED EXCAVATION DATE AND START TIME -** not less than 3 business days or more than 10 business days.

**ANY ADDITIONAL REMARKS YOU MAY HAVE**  
**DURATION OF A JOB -** How long will the job take

You will be given a 10 digit earth number as confirmation of your call and our system will send you the responses from the utilities on the morning of your scheduled excavation date via fax or email

## What do we do?

We are the "Call before you dig" company for all of Pennsylvania. If you plan to disturb the earth with powered equipment you are required by Pennsylvania law to notify the underground utility companies of your intent to dig. Notification occurs by calling 800-222-4776, 24 hours of the day every day of the year. Notification can also be done on our website at [www.papowercall.org](http://www.papowercall.org)

We will then notify the utility companies nearby of your intent to dig. The utility companies are responsible to mark where their underground lines are located with colored flags, paint or chalk.

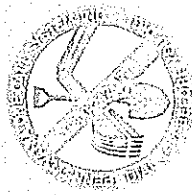
### Please Note:

- PA One Call does not mark utility lines.
- In some cases, the utility company may not mark the service lines you own.
- If you need your sewer lines checked, please visit [www.papowercall.org/sewercheck](http://www.papowercall.org/sewercheck) to call a local "One Call" locator or call 800-222-4776 for more information.

## Why should you call?

Safe digging is no accident if you are installing a fence or deck, or digging for a mailbox post, patio or other excavation project, it is important to know what's below you dig. The utility companies do not want an accident either. The best way to learn what's underground utility lines are located is to call before you dig.

For more information, visit [www.papowercall.org](http://www.papowercall.org)



## Homeowner Quick Tips

- One easy phone call to 800-222-4776 takes less than business days before digging begins helps keep your neighborhood safe.
- Call on Monday or Tuesday if you plan to dig on Saturday or Sunday.
- The utility companies will mark where their underground lines are located with colored paint, flags or chalk.
- Do not remove the flags if you see them in your yard.
- Our service is no cost to homeowners.
- Did you hire someone to install your fence, deck or new patio? Ask to see the PA One Call service number before allowing them to dig on your property.

## The Excavator's Responsibility

- Do not allow anyone to excavate on your property without calling.
- Always look for the markings on the ground before your dig. It is your duty not to see markings, do not allow anyone to dig. Wait for the lines to be marked by the utility.
- Whenever places the call will receive an email or fax with a list of utility owners who have markings or have not marked. Pay attention to this message.
- Respect the markings by not removing flags or disturbing the actual markings.
- Exercise care around the marked lines by hand digging.
- When the project is complete, the excavator should remove the flags or marks from the ground.
- Responsible diggers by using PA One Call are responsible by calling 800-222-4776.