Borough of Sharpsburg

1611 Main Street, Pittsburgh PA 15215-2609
Ph: (412) 781-0546 Fx (412) 781-8449

Building Permit Application

Date:_____ Applicant Name:_____ Address:_____ _____ Ph:_____Fax:_____ E-Mail:_____	Architect/Engineer:_____ _____ Phone:_____ Fax:_____ E-Mail:_____

Property where work is proposed:_____
_____Parcel #_____

New Construction or Alterations

Proposed construction or alteration (explain in detail)_____
_____
Total Square Footage: Basement:_____1st_____2nd_____
Total Construction Cost:

Contractor Information

Contractor Name:_____
Address:_____
Phone:_____ Fax:_____
Worker's Compensation Policy No.:_____
Insurer:_____
Expiration No.:_____
Note, A permit will not be issued until a copy of the worker's compensation insurance certificate is submitted indicating Borough of Sharpsburg as the certificate holder.

All permits required by the Commonwealth of Pennsylvania Department of Labor & Industry including Highway Occupancy Permits shall be obtained by and are the responsibility of the applicant. The applicant shall be responsible for identification of all utilities prior to excavation.

The undersigned hereby acknowledges that the above information and attached documents and drawings are true and accurate and that the permit requirements have been read and understood.

Applicant Signature:_____Print_____Date_____

Building Owner's Signature:_____Print_____Date_____

Borough Use: Date Received_____/_____/_____ Initials_____
Date Approved:_____/_____/_____Date Denied:_____/_____/_____

Residential Building Permit Instructions & Checklist

- ❑ The Building Permit application has been completed in full and signed by both applicant & owner.
- ❑ A survey by a PA registered land surveyor has been submitted with the construction documents. The survey shall indicate the setback distance to every property line. The location of all proposed driveways shall be indicated on the submitted survey.
- ❑ All required Zoning Permits and approvals have been obtained from the municipality (attach copies).
- ❑ All required Plumbing approvals and permits from Allegheny County Health Department
- ❑ Two (2) copies of scaled and accurate construction drawings have been submitted. See instruction below**. Contact PCS for ALL Non-Residential/Commercial project submittals.**
- ❑ All applicable Highway Occupancy Permits from PennDot shall be obtained (attach copies).
- ❑ The attached "Worker's Compensation Affidavit" has been completed.
- ❑ The Required Inspections sheet has been read and signed. (Borough will identify required inspections)
- ❑ All sewer or on-site sewage disposal permit (attach copies).
- ❑ Pennsylvania One Call shall be notified prior to any excavation. 1 800 242-1776

[1.] Residential Plan Review Requirements

- ❑ Two (2) sets of complete drawings shall be submitted with the Building Permit Application.
- ❑ **The required plan review fee shall be submitted with the Building Permit Application payable to PCS: $150.00 for New Dwellings $50.00 for Additions decks, pools, accessory structures**
- ❑ The drawings include a typical wall section indicating the following: footer size and reinforcement, foundation wall details including drainage, anchor bolts, floor joist size, framing sizes, header schedule, ceiling joist and roof rafter details, roof covering details & ventilation details.
- ❑ Engineered lumber specifications and manufacturers product information
- ❑ Floor plans for every story including basement.
- ❑ HVAC details including equipment to be installed.
- ❑ General wiring details including smoke detectors and service size.
- ❑ A plumbing isometric (attached worksheet) design including drainage size, vent size and location, trap location, cleanout locations and drainage fixture details. All building sewer specifications shall be in accordance with the local sanitary authority.
- ❑ Window schedules from the window manufacturer indicating sleeping room egress window and habitable basement egress sizes.

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[1.] ***Checklist for Residential applications. Contact PCS (724 449-2662) for commercial review instructions.***

Worker's Compensation Affidavit

The applicant for the Building Permit, in compliance with Act 44 of 1993, hereby submits the following Information and Affidavit. One of the following requirements must be marked:

- ❑ A current *Certificate of Insurance* indicating Worker's Compensation is attached. The certificate must indicate *Harrison Township* as the holder.

- ❑ The building permit applicant or indicated contractor qualifies as "Exempt from Worker's Compensation. Please indicate the reason for the exemption by checking on of the following and completing the subsequent information:
  - ❑ The Contractor/applicant is the owner of the property.
  - ❑ Contractor/Applicant is a Sole Proprietor without employees.
  - ❑ All of the contractor/applicants employees on the project are exempt on religious grounds under Section 304.2 of the Act. Please explain in detail:
    _____
    _____
  - ❑ Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Act. Explain the status of any/or all workers on the project:
    _____
    _____

Complete the following:

Date:_____
Name of Applicant/Contractor:_____
Adress:_____
City_____ **State**_____ **Zip Code**_____

1. **Any subcontractors used on this project will be required to carry their own worker's compensation coverage.**
2. **The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.**
3. **Violation of the Worker's Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.**

Signature:_____ **Print Name**_____

Company:_____**Title:**_____

Required Inspections

Contact Professional Code Services Inc. to schedule inspections

724 449-2661 FX 724 449-2673

The following periodic inspections (marked ✓) are required to ensure compliance with the Building Permit you have been issued. All inspections shall be requested no sooner than 48 hours before the inspection is required. A FINAL INSPECTION IS REQUIRED FOR ALL BUILDING PERMITS.

- ❑ STAKE-OUT INSPECTION: **Prior to ANY building excavation.** **All** corners of structure clearly staked out…**All** property lines clearly marked.

- ❑ FOOTING INSPECTION: Before placement of concrete. All required re-enforcement in accordance with the approved drawings should be installed. All reinforcement shall be placed in the bottom 1/3 of the footing and shall be suspended on chairs or other approved device**. Re-Bar Grounding Electrode for Electric Service completed.**

- ❑ FOUNDATION: (When reinforcement is required) Prior to the placement of all required cell block grouting. All required reinforcement shall be in place. When added to the grout, all aggregate shall be 3/8 inch maximum.

- ❑ BACKFILL: Prior to any backfill. Rough framing must be completed. All waterproofing shall be completed. All drains and filter fabric shall be in place. All anchor bolts shall be installed.

- ❑ ROUGH ELECTRICAL: All electrical installations shall be installed in accordance with the 2008 NEC. Electrical inspections are performed by PCS (724 449-2661).

- ❑ ROUGH PLUMBING: **Allegheny County Health Department**

- ❑ ROUGH MECHANICAL: After the installation of all ductwork, fuel gas piping and flues.

- ❑ INSULATION: All required insulation installed in walls including areas to be concealed, prior to wallboard.

- ❑ ROUGH FRAMING: After all rough electrical and plumbing inspections have been approved prior to insulation.

- ❑ WALLBOARD: All fasteners installed prior to compound or finish material.

- ❑ FINAL ELECTRICAL: Electrical inspections are performed by PCS (724 449-2661).

- ❑ FINAL PLUMBING: **Allegheny County Health Department**

- ❑ FINAL MECHENICAL: After all equipment and installation of fixtures.

- ❑ OCCUPANCY/FINAL INSPECTION: All mechanical inspections shall be completed.

- ❑ OTHER_____: Where in the opinion of the Building Official a special inspection is required.

Work shall not proceed until the above inspections are approved by the Building Official. Failure to obtain any of the above inspections may result in penalties in accordance with the UCC Act 45 & local ordinance.

Signature:_____Print;_____Date:_____

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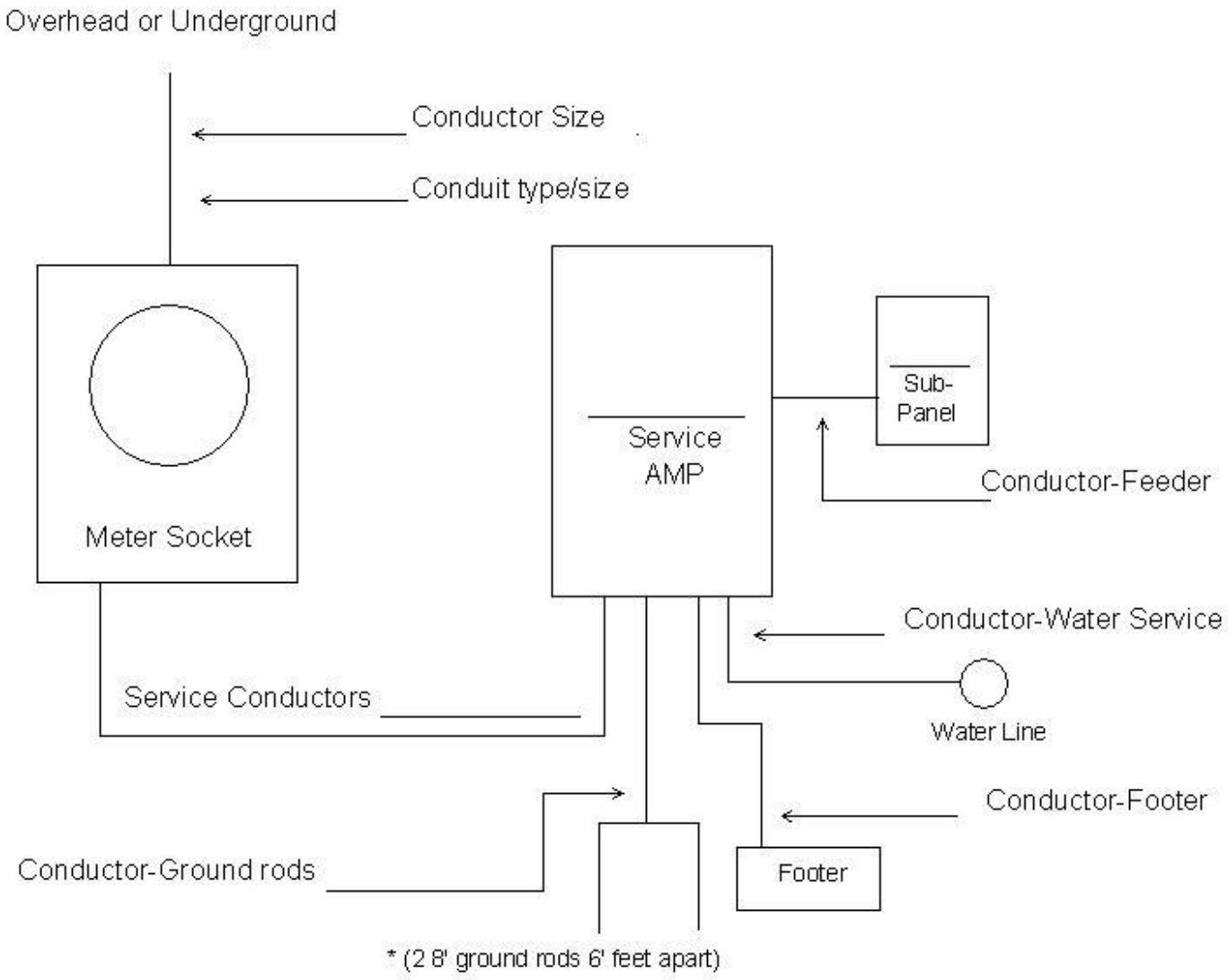
Energy Efficiency Data Sheet

<u>The following information must be submitted with the construction documents OR a valid Recheck shall be submitted.</u> The following information must be clearly indicated on the construction document (ceiling, floor, wall assemblies only). Mechanical equipment must be identified, located and labeled on the construction documents. A dimensional section drawing shall be submitted for all insulated floor slabs. <u>ResCheck energy software is available at www.energycodes.gov</u>

1. Ceiling Framing Type_____
2. Ceiling Insulation Type_____R-Value_____
3. Skylight Frame Material: Metal Frame ☐ Metal Frame With Thermal Break ☐
   Wood Frame ☐ Vinyl Frame ☐ Other_____
4. Skylight U-Factor_____ Skylight sq.ft._____ Single Pane☐ Double Pane ☐ Double Pane-Low E ☐ Triple Pane ☐ Triple Pane Low-E ☐
5. Wall construction_____
6. Gross sq.ft. of Wall space_____
7. Wall Cavity Insulation R-Value_____ Continuous Insulation R-Value_____
8. Window Frame Material Metal Frame ☐ Metal Frame With Thermal Break ☐
   Wood Frame ☐ Vinyl Frame ☐ Other_____
9. Gross sq.ft. of Window openings_____
10. Windows; Enter information on the poorest window efficiency in the building: Single Pane☐ Double Pane ☐ Double Pane-Low E ☐ Triple Pane ☐ Triple Pane Low-E ☐
    ***Each window must be identified separately or number of each type. Attach schedule**
11. Doors:
    1. Solid (under 50% glazing) ☐ Glass ☐ U-Factor_____ R-Value_____ Sq.ft._____
    2. Solid (under 50% glazing) ☐ Glass ☐ U-Factor_____ R-Value_____ Sq.ft._____
    3. Solid (under 50% glazing) ☐ Glass ☐ U-Factor_____ R-Value_____ Sq.ft._____
    4. Solid (under 50% glazing) ☐ Glass ☐ U-Factor_____ R-Value_____ Sq.ft._____
    5. Solid (under 50% glazing) ☐ Glass ☐ U-Factor_____ R-Value_____ Sq.ft._____
12. Basement Wall Type_____Gross sq.ft. Area_____ Insulation R-Value_____
    Measured in feet; (ie 7.5')
    - Wall Height (top of wall to basement floor)_____
    - Depth below grade (finish outside grade to basement floor_____
    - Height of insulation (top of wall to where insulation stops)_____
13. Floor Assembly;
    - **Wood Assembly**; Over un-conditioned space ☐ Over outside air ☐
      Gross Area_____ Cavity R-Value_____ Continuous Insulation R-Value_____
    - **Slab on Grade;** Unheated ☐ Heated ☐
      Gross Area_____ Cavity R-Value_____ Continuous Insulation R-Value_____
    - Structural Insulated Panels; Over un-conditioned space ☐ Over outside air ☐
      Gross Area_____ Cavity R-Value_____ Continuous Insulation R-Value_____
14. Crawl Space Wall Type_____Gross sq.ft. Area_____
    Measured in feet; (ie 7.5')
    - Wall Height (top of wall to basement floor)_____
    - Depth below grade (finish outside grade to basement floor_____
    - Height of insulation (top of wall to where insulation stops)_____
15. Heating Equipment; Where more than (1) unit, use least efficient data
    - Furnace Heating Efficiency_____%
    - Boiler Heating Efficiency _____%
    - Heat Pump Heating Efficiency_____%
    - Air Conditioner Cooling Efficiency _____SEER

Provide Information for New Electrical Service Work