

Chambersburg Office: 380 Wayne Ave. Chambersburg, PA 17201 Phone: 717 496-4996 Bedford Office: 125 S. Richard Street, Suite 102, Bedford, PA 15522 Phone: 814 310-2326

Somerset Office: 510 Georgian Place, Somerset, PA 15501 Phone: 814 444-6112

Adams Office: 1895B York Road, Gettysburg, PA 17325 Phone: 717 321-9046

Email: pmca@pacodealliance.com Website: https://pacodealliance.com/

## Requirement checklist to obtain a building permit for a:

## RESIDENTIAL ADDITION, RENOVATION OR ACCESSORY STRUCTURE

Completed two-page application (must be legible and signed) [2 COPIES]
Land Use Permit (signed/approved by the Municipality) [2 COPIES]
Site Plan (include all existing structures, proposed structure and their distances to all lot lines) [2 COPIES]
Building Plans (floor plan, elevation, footer, foundation, framing, etc.) [2 SETS]
Deck plan if applicable (Required when attached to existing structure and/or over 30" high at any point around the perimeter, measured from ground to top of finished floor, additional permitting and inspections are required.) [2 SETS]
Copy of Contractors Certificate of Insurance for Workers Compensation  OR
If doing the work yourself submit Workers Compensation Insurance Coverage Waiver [refer to the attached document].
Driving directions from a known landmark or intersection

- ✓ After submitting all required documents your application will be reviewed.
- ✓ PMCA will contact you to let you know if your application has been approved or denied.
- ✓ When the project is approved you will be notified the Building Permit is ready. Prior to obtaining the building permit all charges, i.e. administrative, inspections fees must be paid.
- ✓ Be advised additional fees may be applied, throughout the project, for failed or missed inspections.

If more detailed guidance on wood frame construction would be helpful refer to:

DETAILS FOR CONVENTIONAL WOODFRAME CONSTRUCTION

from the American Forest and Paper Assoc. 2001 (55 pages)

Please ask our staff or visit our website if additional information is needed.



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#### APPLICATION FOR BUILDING PERMIT / USE CERTIFICATE

Rcvd. Date Stamp Here

Please print legibly – failure to do so may re	sult in a denial, delay or rejection	of this application.	
	Permit Application N	No	
	1. PROPERTY / SITE		
Site Address:		Tax Map / P	arcel No.:
Complete Address / Street /	Lot#		
City	State		Zip
Municipality:	County:	Land Use F	Permit No
<u>Use:</u> ☐ <b>Residential</b> ☐ Single-Family D	welling / Duplex	ily New / Relocated	Manufactured Home
☐ Commercial ☐ Other		Floodpla	ain present: Yes No
Improvement Type: New Addition	☐ Alteration ☐ Repair/Re	placement Relocation	Other
2. LAND / PROP	ERTY OWNER'S INFORMATIO	N (Complete Section 5 for Co	ontractor's Info)
First Name Mi.	Last Name	Phone No:	Cell No.:
Street Address	City	State Zip	Email:
3. BUILDI	NG / STRUCTURE OWNER'S II	NFORMATION [If Different Fro	m Above]
First Name Mi.	Last Name	Phone No:	Cell No.:
Street Address	City	State Zip	Email:
	4. BUILDING PERMI	T APPLICATION	
Provide below description of Work: (Also prov	ide details on plot plan: Show all	improvements on lot & appro	x. distances to lot lines)
Total Lot Area: Acres/Sq. F	t. ESTIMATED COST OF CO	DNSTRUCTION: \$	
ICC Use Group:		Construction Type:	
ESTIMATED START DATE://_	ESTIMA	ATED COMPLETION DATE: _	

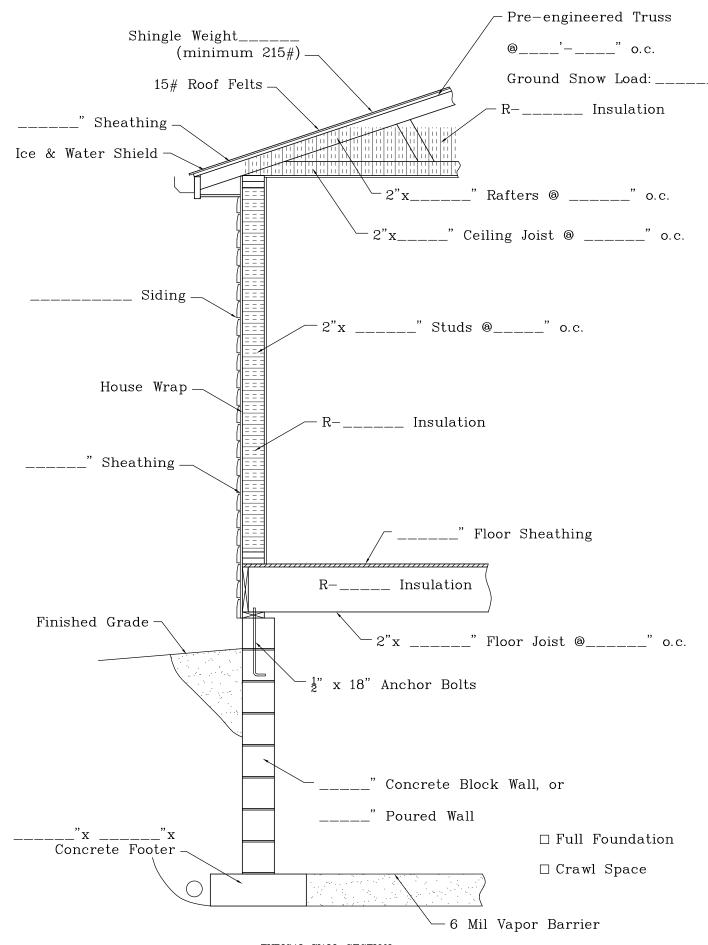
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#### 5. CONTRACTOR INFORMATION

Business Name:		Phone No:			
Contractor Street Address		City		State Zip	
Person in Charge of Work:		Phone No.:			_
Email:		Cell No.:			
Workman's Compensation Insurance: Provided 0	n Record	PA Home Improvement			
►► THIS SECTION MUST BE FULLY COM	PLETED OR THE APPLIC	CATION MAY BE REJEC	TED AS INCOMPL	ETE ◀◀	
I certify that I am the owner of record, or that I have been aut authorized by the owner of record. I understand and assume start of construction, and agree to conform to all applicable to or his representative shall have the authority to enter the are the Codes governing this project. I further certify that this info	responsibility for the estab ocal, state, and federal laws as in which this work is bei	cord to submit this applicat lishment of official property governing the execution ag performed, at any reaso	y lines for required se of this project. I certify onable hour, to enforce	tbacks prior to the that the Code offici- te the provisions of	al
Applicant Signature	Print Name ( <i>le</i>	gibly):		Date	_
Applicant Phone (Land Line and Cell)		Applicant Email			_
Business Name (if applicable)	Ema	ail			_
☐ Business <u>OR</u> ☐ Applicant Complete Mailing Address					_
Business Phone Number (Land Line and Cell)					_
	7. PROJECT DETA	AILS			=
Trades: ☐ Building ☐ Electrical Work ☐ Plumbing ☐ Heat Source (if applicable):  Foundation Type: ☐ Crawlspace ☐ Foundation			ession/Fire Alarm Sys		
Details:					_
Si	UBCONTRACTOR INFO	RMATION			_
<del></del>	tors for major trades. Use addition		Additional sheet(s)	attached	
Contractor	Address		Phone No	Pa HIC #	
Contractor	Address		Phone No	Pa HIC #	
Contractor	Address		Phone No	Pa HIC#	
Contractor	Address		Phone No	Pa HIC #	

APPLICANT OR AUTHORIZED AGENT IS RESPONSIBLE FOR CONTACTING PMCA OFFICE FOR ALL REQUIRED INSPECTIONS.

►► IF NOT APPLICABLE TO YOUR PROJECT PLEASE PUT N/A ON THE LINE/ SPACE ◄ ◄



TYPICAL WALL SECTION

## **DIRECTIONS TO THE SITE LOCATION**

pplicant:	Phone:	
ections.		
	1 4 1 6	
Jse this space if needed to further clarify t	ne site location:	

Please Note: Inspectors cannot inspect what they cannot find, Be certain the directions are clear. Use Road or Street names, distances between turn offs, and the direction of that travel (North South East or West). Landmarks are very helpful.

# ► Workers' Compensation Insurance Coverage Information <

A. The applicant is
A contractor within the meaning of the Pennsylvania Workers' Compensation Law
☐ Yes ☐ No
If the answer is "Yes," complete Sections B and C below as appropriate.
B. Insurance Information
Name of Applicant:
Federal or State Employer Identification No.
Applicant is a qualified self-insurer for workers' compensation.  Certificate attached
Name of Workers' Compensation Insurer:
Workers' Compensation Insurance Policy No  Certificate attached
Policy Expiration Date:
C. Exemption – MUST BE NOTORIZED  Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.
The undersigned swears or affirms 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:
Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the township.
Homeowner who elects to do all work without contracting or hiring others to assist.
Religious exemption under the Workers' Compensation Law.
Signature of Applicant: Print Name:
Address: Date:
Commonwealth of Pennsylvania, County of
On this, the, 20 before me, (Notary)
the undersigned personally appeared, known to me (or satisfactorily proven)
to be the person whose name subscribed to the within instrument, and acknowledged that he/she executed the same for the purpose herein contained.
In Witness whereof, I hereunto set my hand and official seal.
Notary Public



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## When applying for a Building Permit you need the following:

- Fill out the appropriate application answering all questions applicable to your job. Application must be legible and signed. (2 copies)
  - o If a portion of the application is not applicable to your project put a N/A on the line.
- A copy of the signed Land Use Permit from the Municipality (Borough or Township) (2 copies)
- A Site Plan showing the location of the existing improvements/structures on your property and approx. distances to all property lines, well, septic system, driveway, etc. Also show the location of the proposed construction. (2 copies)
- Drawings showing details of the construction you want to do. (2 copies)
- Copy of Contractors Certificate of Insurance for Workers Compensation OR if doing the work yourself submit Workers Compensation Insurance Coverage Waiver [refer to the attached document].

## After Building Permit Application is submitted:

- After submitting all required documents your application and drawings will be reviewed.
- PMCA will contact you with an approval or denial.
- If approved, your permit will be issued. The inspection & administrative fees are due when you pick up the permit. You will also obtain a copy of your original application and stamped set of plans.

# After Building Permit is issued:

- The Building Permit placard and Municipal Placard are to be visible on site at all times during theconstruction process.
- To schedule an inspection call the office where your permit application was submitted or visit our
  website to schedule online. Be prepared to have your Permit Number, address and type of
  inspection you are requesting.
  - If you request an inspection BEFORE 3 pm, every effort is made to schedule the inspection for the next business day.
- The copy of your application and approved plans are to remain on site when the building inspectors
  come for inspections. Be advised: we <u>cannot</u> inspect if these are not on site and you may incur
  additional costs due to extra trip(s) by the inspector.

# ✓ Checklist for the Site Plan to be provided with the Permit Application

- 1. Site plans are essential and must be clearly legible and reproducible regardless of the reason for requesting the permit.
- 2. Use an 8 1/2" X 11" sheet of paper at minimum.
- 3. After locating all the structures on your property show distances in feet to the lot lines and between the structures.

#### Provide dimensions of the property getting the proposed improvement

- o Drawing of approx. property layout (Can use hand drawing, photocopy of survey, etc.)
- Acreage (Refer to deed or survey drawing)
- o Approx. boundary dimensions (Can be from the deed, field measurement, or a survey drawing)
- o Parcel Number (Not mandatory obtained from deed or property tax notice)

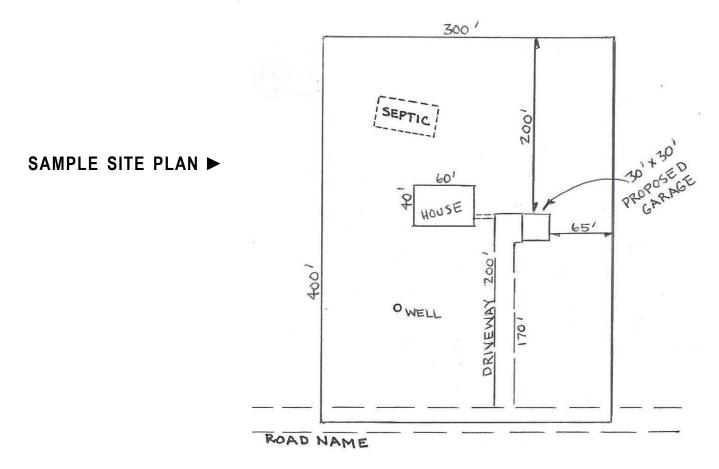
#### Existing Buildings / Structures with Corresponding Dimensions

- Houses
- o Sheds
- o Barns
- Swimming Pools

- o Deck / Patios
- Other buildings or structures on the property
- Location of on lot well and septic IF applicable

#### Proposed Improvement(s)

- o Proposed Structure Dimensions (House, Shed, Barn, Addition, Deck, etc.)
- Location of Proposed Driveway and Sidewalk



Revised: 01-29-22 PMCA