APPLICATION FOR BUILDING PERMIT

PA. UCC and referenced INTERNATIONAL BULDING CODE SERIES is enforced

MUN	VICIPALITY	
APPLICATION DATE: _		APPLICATION NUMBER:
1. Property Informatio	<u>n</u>	
Site Address:		
		Residential
2. Owner's Informatio		
Name:		Phone:
3. <u>PERMIT TYPE</u> : E	LECTRICAL	PLUMBING BUILDING OOL PORCH/DECK
Estimated Cost of Constru		
Estimate Start Date		Estimated Completion Date
owner of record and that I understand and assume res	have been authorized by ponsibility for the establ d agree to conform to all	e named property, or that the proposed work is authorized by the the owner to make this application as his authorized agent and ishment of official property lines for required setbacks prior to applicable laws of this jurisdiction. I further certify that this owledge.
APPLICATION SIGNA	TURE	DATE
ADDRESS		PHONE

5. Contractor Information

Please list additional general contractor information on additional sheet (s) if applicable

Name of Contractor		Phone		
Chief Executive Officer		Phone	_	
Person in Charge of V	Vork	Phone	_	
Contractor Address_			_	
City		State Zip		
	·			
6. Office Inform	ation			
APPLICATION FEE:	\$	ISSUANCE DATE		
PERMIT FEE:	\$	EXPIRATION DATE		
INSPECTION FEES:	\$	EXTENSION DATE		
TOTAL FEES:	\$			
APPLICATION IS:	GRANTED	DENIED		
SIGNATURE OF PERM	NIT OFFICER	DATE	_	

APPLICANT OR AUTHORIZED AGENT IS RESPONSIBLE FOR CONTACTING BUILDING INSPECTOR FOR REQUIRED INSPECTIONS.

Office (717) 944-4831

The Borough of Royalton Fax (717) 944-2469

101 Northumberland Street Middletown, Pennsylvania 17057-1612

WORKERS' COMPENSATION INSURANCE COVERAGE AFFIDAVIT ACT 44-1993

SECTIO	N 1	APPLICANT (Check Appropriate Box)
	Applicant is the property owner and not a contractor within the meaning of the Pennsylvania Workers' Compensation Law (complete only Section 3)	
	Contractor within the meaning of the Pennsylvania Workers' Compensation Law (complete Section 2 and 3)	
Please N	lote:	Documentation shall be also provided for all subcontractors.
SECTIO	N 2	INSURANCE INFORMATION
Contrac	Contractor Name/Policyholder:	
Federal	Federal or State EIN No.:	
Address	Address:	
City, Sta	City, State, Zip Code:	
Name o	Name of insurer or Self-Insurer:	
Address): 	
City, Sta	ete, Zi _l	p Code:
Policy N	Policy No.:	
Policy E	Policy Expiration Date (mm/dd/yy):	
	SECTION 3 EXEMPTION	
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:		
	Property owner performing own work (form to be signed and dated only)	
	Contractor/Applicant is a sole proprietorship without employees (form shall be signed, dated, and notarized)	
Contractor/Applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act (form shall be signed, dated, and notarized – attach copies of religious letters for all employees)		

SECTION 4	VALIDATION	
SWORN and s	ubscribed before me, this	
	day of 20	Applicant's Signature
	-	Name (Print)
	Notary Public	Applicant's Address
	-	City, State, Zip
	- Seal	Phone Number
	- -	Date

NEW CONSTRUCTION PLANS AND SPECIFICATIONS/SITE PLAN

*Submit two (2) complete sets of drawings and plans that contain the information listed below.

*Drawings and plans must be submitted on minimum 18" X 24", or maximum 30" X 42" paper. All sheets are to be the same size and sequentially labeled.

*Plans are required to be clearly legible, with scaled dimensions, in indelible ink, blue line, or other professional media.

*Plans will not be accepted that are marked preliminary or not for construction, that have red lines, cut and paste details or those that have been altered after the design professional has signed the plans.

PLEASE NOTE: A separate submittal of plans is required for each building or structure.

Floor plans with:

- A. Location and size of walls, windows, doors and stairs.
- B. Beams and headers, with supports and attachments.
- C. Ceiling joist directions, size and spacing.
- D. Electrical receptacles, switches, lights and smoke detectors.

Foundation/first floor framing plan with:

- A. Specific wall footing width and depth.
- B. Foundation wall size and construction type.
- C. Floor slab details.
- D. Pier and footing sizes with dimensions for their location and spacing.
- E. Girder sizes and locations, floor joist direction, size spacing and species.
- F. Crawispace vent calculations, access door size and location.
- G. Anchor bolts location and spacing.

Roof framing showing:

- A. Direction, size and spacing of rafters as well as special ridges or support for vaults, cathedral areas and valleys.
- B. Roof vent calculations and roof coverings.

Elevation views

- A. Show grade elevations relative to building foundation.
- B. Show exterior decks, porches, and steps.

Building Cross-section

A. Representative cross section with framing members and insulation called out.

Miscellaneous Information:

- A. Insulation values for floors, walls and ceilings.
- B. Attic access, elevations, and calculated areas for finished floor spaces and garage.
- C. Species and grade of framing members.

NOTE:

All structural information must comply with Pennsylvania UCC – International Residential Code, 2003 Edition. Structural elements not found in the IRC must either be sealed by a professional engineer or architect, registered in the State of Pennsylvania, or comply with other professionally recognized evaluation services such as NES.

SITE PLAN

The scale of the plot plan should be sufficient to show the development and adjacent areas and allow the municipality and approving agency to easily identify the required information.

- a. North arrow, date, lot number and plat, address and street name fronting proposed structure.
- b. Lot lines and size of lots in acres.
- c. Existing, streets, roads, access roads, highways, etc. which are in or adjacent to the project site.
- d. Building setback requirements mandated by local or county subdivision ordinances.
- e. Location of proposed structure(s) and any existing structure(s) on the site clearly dimensioned in relation to lot lines, corners.
- f. The location and dimensions of any existing utility easements (sewer, water, etc).
- g. Show the location of all proposed underground utilities, including water, sewer, gas and electrical.
- h. Any surface water (ponds, detention facilities, lakes, streams) on the property or within 50 ft. of the proposed building.
- i. Contact Light-Heigel for additional site plan requirements if the project involves any of the following:
 - 1. Retaining walls over 4'
 - 2. Construction in a floodplain
 - 3. Wetlands

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

If checked yes, applicant must submit certification that lowest floor elevation is at or above the design 100-year flood elevation, as required in the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3. All living spaces and mechanical equipment shall be placed above the 100-year flood elevation.

Note: The National Flood Insurance Program recommends that residential and non-residential structures be elevated 1.5' above the 100-year elevation.

*THIS IS A REQUIREMENT OF THE BOROUGH OF ROYALTON.

BOROUGH OF ROYALTON 101 NORTHUMBERLAND ST MIDDLETOWN, PA 17057

ELECTRIC SERVICE INFORMATION SHEET DATE FILED
BEFORE A PERMIT IS ISSUED, THE FOLLOWING INFORMATION MUST BE FURNISHED BEFORE ANY NEW SERVICE, UPGRADE, OR ELECTRIC HEAT IS INSTALLED WITHIN THE BOROUGH OF ROYALTON. ALSO, THE BOROUGH MUST BE GIVEN THREE (3) DAYS ADVANCED NOTICE BEFORE ACTUAL INSTALLATION. *SERVICE DROP ATTACHMENT MUST BE PROVIDED BY THE PROPERTY OWNER OR HIS/HER ELECTRICIAN.
PROPERTY LOCATION:
OWNER'S NAME, ADDRESS & TELEPHONE NUMBERS:
CONTRACTOR NAME & TELEPHONE NUMBER:
INSPECTION AGENCY:
IS THE SERVICE? NEW UPGRADE HEAT
IS SERVICE? 100 AMP OTHER
SPECIAL SERVICE THREE PHASEVOLTAGE
ELECTRIC HEAT
WHAT TYPE? BASEBOARDBOILERHEAT PUMP OTHER TOTAL KILOWATTS
IS STRUCTURE SINGLE FAMILY, MULTI FAMILY OR COMMERCIAL ESTABLISHMENT
REMARKS FROM THE ELECTRIC SHOP:
ELECTRICAL UPGRADES
DESCRIPTION OF ANY NEW ELECTRIC WORK TO BE COMPLETED:
PERSON GIVING LOCATION:
DATE: