

Commercial Application

Tracking #

Permit #

Uniform Construction Code (UCC)

APPLICATION FOR BUILDING PERMIT

Application Type	Accessibility <u>ONLY</u> Review Alteration or Renovation New Structure/Facility Plan Revision or Partial Occupancy Request	Addition New Building Phase Approval Unapproved Existing Building
------------------	--	--

Use/Occupancy Classification	A-1	A-2	A-3	A-4	A-5	B	E
Check box to <u>left</u> of applicable group (Check all that apply.)	I-1	I-2	I-3	I-4	M	R-1	R-2
	R-3	Adult Care	R-3	R-4	S-1	S-2	U

Site Information

Project Name: _____

Street #, City, State, Zip: _____

Special Requirements & Documentation Check each block below indicating that all of the following will be submitted with this application:

Three (3) site plans
 One (1) complete copy of the UCC-2 PLAN REVIEW CHECK LIST
 One (1) set of specifications (only if Addition, Alteration, New Building or New Structure/Facility)

Three (3) complete sets of construction drawings

Does this construction involve modular units built in a factory? Yes No If yes, submit 1 copy of a letter from a licensed design professional certifying that construction within the modular units (or the fully assembled modular building) and hidden from view will fully comply with all requirements of the UCC.

Is this construction regulated by the Health Care Facilities Act? Yes No If Yes, submit 1 copy of approval letter from the Pennsylvania Department of Health.

Is this construction exempt from energy code requirements? Yes No If yes, submit 1 copy of letter indicating that the building or structure will use neither electricity nor fossil fuels, and thus is exempt per ASHRAE 90.1, S 2.3(B)
 If no, submit 1 copy of the COMcheck-EZ Certificate of the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.

If **“legally occupied,”** you must select the code under which the building will comply (*choose only one*)
 International Existing Building Code Chap. 34, International Building Code
 Electric Power Provider Job #
 Gas Provider

Design Professional in Responsible Charge: (Seal Must be in Space to Right of Name)
 Name
 Address
 Pa. License Number
 E-Mail
 Phone #
 Fax #

Owner Information Owner Name
 Street Address
 City State Zip Code
 Phone #

Deferred: If you are not submitting plans and other documentation for any of the items listed below Submissions with this application, check the appropriate box below and indicate this on the first page of each building plan set.
 Fire Alarm System Truss Shop Drawings (certified) Sprinkler System

Applicant’s Certification: As owner or authorized agent of the project for which this application is filed, I certify that:
 1. The estimated construction cost and all other information provided as part of this application for a building permit is correct.
 2. The building or structure described in this application will not be occupied until all known code violations are corrected and a Certificate of Occupancy has been received from the Municipality.
 3. This project will be constructed in accordance with the approved drawings and specifications (including any required non-design changes) and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401 – 405.
 4. Any changes to the approved documents will be field with the Municipality.
 5. If the licensed architect or engineer in reasonable charge of this construction should change, written notice of the change will be provided to the Municipality.
 6. When required, up to 20% of the total cost of any work performed on any area of primary function in an existing building will be expected to provide an accessible route to the area of primary function.
 7. No error or omission in either the drawings and specifications or application, whether approved or not, shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405.

VQVCN'DWNFPI 'EQUV<' _____

Applicant’s Name:

Street Address

City State Zip Code

Phone #

Total cost of Job

Applicant Signature(s) Date : _____
 mm/dd/yyyy