

# BUTLER COUNTY BUILDING PERMIT APPLICATION

ID NO. \_\_\_\_\_ DISTRICT: 200 (Lancaster Township) MAP AND PARCEL NO. \_\_\_\_\_

**IMPORTANT - COMPLETE ALL ITEMS - MARK BOXES WHERE APPLICABLE**

## I. IDENTIFICATION

OWNERS NAME PER DEED OR TITLE \_\_\_\_\_ NAME \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_ PROPERTY ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_

CONTRACTOR \_\_\_\_\_

## II. TYPE AND COSTS OF IMPROVEMENTS

<b>A. TYPE OF IMPROVEMENT</b> <input type="checkbox"/> 1. NEW BUILDING <input type="checkbox"/> 2. ADDITION <input type="checkbox"/> 3. ALTERATIONS <input type="checkbox"/> 4. REPAIR/REPLACEMENT <input type="checkbox"/> 5. WRECKING <input type="checkbox"/> 6. RELOCATION <input type="checkbox"/> 7. FOUNDATION	<b>B. PROPOSED USE</b> <input type="checkbox"/> 1. SINGLE FAMILY <input type="checkbox"/> 2. DUPLEX <input type="checkbox"/> 3. MULTI-FAMILY <input type="checkbox"/> 4. GARAGE <input type="checkbox"/> 5. CARPORT <input type="checkbox"/> 6. PORCH/INGROUND POOL <input type="checkbox"/> 7. MOBILE/MODULAR HOME (SEE E)	<input type="checkbox"/> 8. CHURCH <input type="checkbox"/> 9. INDUSTRIAL <input type="checkbox"/> 10. COMMERCIAL <input type="checkbox"/> 11. INSTITUTIONAL <input type="checkbox"/> 12. PUBLIC UTILITY <input type="checkbox"/> 13. SCHOOL <input type="checkbox"/> 14. OTHER _____	<b>C. CONST. OR DEMO COST</b> 1. COST OF CONST. A. ELECTRICAL _____ B. PLUMBING _____ C. HEATING/AC _____ D. OTHER _____ TOTAL _____
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D. OWNERSHIP     1. PRIVATE     2. PUBLIC    E. MOBILE/MODULAR HOME SERIAL NO. \_\_\_\_\_

## III. SELECTED CHARACTERISTICS OF BUILDING

<b>A. PRINCIPAL TYPE OF FRAMING</b> <input type="checkbox"/> 1. BRICK-STONE-BLOCK <input type="checkbox"/> 2. WOOD FRAME <input type="checkbox"/> 3. STRUCTURAL STEEL <input type="checkbox"/> 4. REINFORCED CONCRETE <input type="checkbox"/> 5. OTHER _____	<b>B. TYPE OF SEWAGE DISPOSAL</b> <input type="checkbox"/> 1. PUBLIC <input type="checkbox"/> 2. PRIVATE (PERMIT NO) _____	<b>C. DIMENSIONS</b> _____ X _____ 1. NO. OF STORIES _____ 3. BSMT SQ. FT. _____ 2. TOTAL ACREAGE _____ 4. TOTAL SQ. FT. _____	<b>D. TYPE OF WATER SUPPLY</b> <input type="checkbox"/> 1. PUBLIC <input type="checkbox"/> 2. PRIVATE	<b>E. NUMBER OF PARKING SPACES</b> 1. OFF STREET _____ 2. ENCLOSED _____ OUTDOORS _____
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## IV. RESIDENTIAL BUILDINGS ONLY

A. NO. OF BEDROOMS \_\_\_\_\_  
B. NO. OF BATHROOMS \_\_\_\_\_  
1. FULL BATHS \_\_\_\_\_  
2. HALF BATHS \_\_\_\_\_

## VII. TYPE OF MECHANICAL

YES NO  
A. A/C \_\_\_\_\_  
B. ELEV \_\_\_\_\_

## IX. DIRECTIONS TO SITE FROM NEAREST INTERSECTION

## V. LOCATION

A. BUILDING SETBACK  
1. FROM STREET \_\_\_\_\_  
2. FROM SIDE LS \_\_\_\_\_ RS \_\_\_\_\_  
3. FROM REAR \_\_\_\_\_

## VIII. TYPE OF HEATING FUEL

A. GAS     D. COAL  
 B. OIL     E. OTHER  
 C. ELEC \_\_\_\_\_

## VI. CHECK OTHER STRUCTURES ON PROPERTY

<input type="checkbox"/> A. NONE	<input type="checkbox"/> E. BARN
<input type="checkbox"/> B. HOUSE	<input type="checkbox"/> F. SHED
<input type="checkbox"/> C. MOBILE/MODULAR HOME	<input type="checkbox"/> G. INGROUND POOL
<input type="checkbox"/> D. GARAGE	<input type="checkbox"/> H. OTHER _____



## X. HIGHWAY AND ENERGY ACTS

A. HAVE YOU OBTAINED A PERMIT AS REQUIRED BY SECTION 420 OF THE STATE HIGHWAY LAW (P.L. 1242 NO. 428)?     YES     NO

B. HAVE YOU COMPLIED WITH ACT 222 OF THE BUILDING ENERGY CONSERVATION ACT?     YES     NO

XI. THE OWNER OF THIS BUILDING AND/OR UNDERSIGNED AGREES TO CONFORM TO ALL APPLICABLE LAWS OF

**LANCASTER TOWNSHIP**

SIGNATURE OF APPLICANT \_\_\_\_\_ ADDRESS \_\_\_\_\_ DATE OF APPLICATION \_\_\_\_\_

SIGNATURE OF MUNICIPAL OFFICER \_\_\_\_\_ FEE \_\_\_\_\_ APPROVED / REFUSED \_\_\_\_\_

## XII. FOR MUNICIPAL USE ONLY

COMMENTS, RESTRICTIONS, DATE PERMIT EXPIRES (ACCORDING TO LOCAL CODES)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# Permit Application



Customer Number if known 

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Number \_\_\_\_\_

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.

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

**COMMERCIAL AND MULTI-FAMILY**

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

\_\_\_\_\_ Sub-division and land development approval, if required.

Plan Review options:

\_\_\_\_\_ Plans may be submitted electronically (**Preferred Method**) by going to our website, [www.mdia.us](http://www.mdia.us), and click on Offices, click on Plan Review and then Submit Plans. If using the electronic method, once the plans are approved, they will be returned to the design professional and it will be their responsibility to make as many hard copies as needed and provide them to the BCO and the municipality so the permit can be issued. No permits will be issued and construction **shall not** start until all applicable fees are paid. It is then required that a completed set of stamped plans be on the jobsite and made available to the field inspector during the construction.

OR

\_\_\_\_\_ 3 (Three) complete paper set of sealed drawings, including specification books from a PA registered design professional that show in detail code compliance for all work proposed.

\_\_\_\_\_ A site plan showing the outside dimensions of the proposed structure, including distances in feet to the front, sides and rear property lines.

\_\_\_\_\_ Sewer permit.

\_\_\_\_\_ Workers' compensation insurance certificate or an affidavit of exemption.

\_\_\_\_\_ Location of parking spaces, accessible routes, public transportation stops and other required accessibility features.

\_\_\_\_\_ Highway access permit Penn Dot/Municipal, if required.

\_\_\_\_\_ Plan review/fee (permit clerk will calculate).

\_\_\_\_\_ Automatic fire sprinkler system designed in accordance with NFPA 13 where applicable.

\_\_\_\_\_ 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.

## **INSPECTION PROCEDURES COMMERCIAL AND MULTI-FAMILY CONSTRUCTION**

- Building permit must be posted on the site of the work and clearly visible from the road until completion of the project.
- Your approved plans must be available at all times for inspection. These are the plans that were submitted with your application and were marked "Approved" by the building code official.
- **DO NOT schedule an inspection if the work is not ready!!!!**
- When scheduling an inspection, you must supply a permit number to the inspector.

**PLEASE GIVE THREE (3) WORKING DAYS ADVANCE NOTICE**  
**FOOTING INSPECTION WILL BE GIVEN PRIORITY**  
**MIDDLE DEPARTMENT INSPECTION AGENCY, INC.**

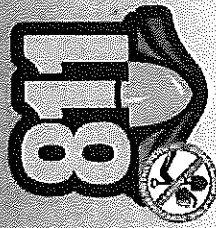
1. Footing – To be done after forming and prior to placing of concrete.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
2. Foundation inspection – French drain and water-proofing prior to backfilling.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
3. Plumbing under slab (rough-in) done prior to placing concrete floor.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
4. Framing inspection – Done prior to insulating, but after heating, plumbing and wiring are roughed in, and prior to any exterior finishes being applied.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
5. Energy conservation.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
6. Wallboard- Only needed if there is an integral or attached garage.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**
7. Final inspection – When job is completely finished, prior to occupancy permit and after plumbing, mechanical and electrical.  
**Inspector, Brian Rearick                      Phone, 1-800-682-6342**

**BEFORE DIGGING CALL 811 – SEE ATTACHED BROCHURE**









**Safe digging is  
no accident!**

**Know what's  
below.**

**Dial 8-1-1  
before you dig.**



**TEMPORARY MARKING GUIDELINES**

	WHITE	Prepared Excavation
	PINK	Temporary Survey Markings
	RED	Electric Power Lines, Cables, Conduit and Lighting Cables
	YELLOW	Gas, Oil, Steam, Petroleum or Gaseous Materials, Hazardous Materials
	ORANGE	Communication, Alarm or Signal Lines, Cables or Conduit and Traffic Loops
	BLUE	Parabolic Water
	PURPLE	Reclaimed Water, Irrigation and Slurry 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 NEAREST INTERSECTING STREET TO THE WORK SITE**  
**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 LOCATOR FIND THE SITE** - Clarifying information to specify the exact location of the dig

**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 or diameter

**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

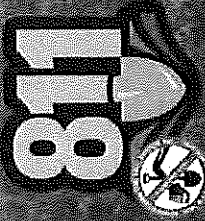
**SCHEDULED EXCAVATION DATE AND START TIME** - not less than 3 business days or more than 10 business days.

**DURATION OF A JOB** - How long will the job take

**ANY ADDITIONAL REMARKS YOU MAY HAVE**

You will be given a 10 digit serial 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

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



[www.pa811.org](http://www.pa811.org)



## 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 do so. Notification occurs by calling 8-1-1 or 1-800-242-1776, 24 hours of the day, every day of the year. Notification can also be done on our website at [www.paonecall.org](http://www.paonecall.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 drain cleared, be sure to check [www.paonecall.org/crossbone](http://www.paonecall.org/crossbone) for "Call Before You Clear" information or call 8-1-1 for more information.

## Homeowner Quick Tips

- One easy phone call to 8-1-1 three to ten 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 serial number before allowing them to dig on your property.

## The Excavator's Responsibility

- Dial 8-1-1 or 1-800-242-1776.
- Do not allow anyone to excavate on your property without calling.
- Always look for the markings on the ground before your dig date.
- If you do not see markings, do not allow anyone to dig. Wait for the fines to be marked by the utility.
- Whoever places the call will receive an email or fax with a list of facility owners who have marked 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 or pavement.
- Report mistakes by dialing 8-1-1. Report mistakes by dialing 8-1-1.

## 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. Dial 8-1-1 or 1-800-242-1776 before you dig. The utility companies do not want an accident, either. The best way to learn where underground utility lines are located is to call before you dig.

For more information, visit [www.pa811.org](http://www.pa811.org)



## CONSTRUCTION DOCUMENTS REQUIRED

- Site plan showing to scale the size and location of all new construction and all existing structures on the site. Distances from lot lines, established street grades and proposed finished grades. All parking including accessible spaces with signage. Accessible paths to entrances.
  
- COMPLETED BUILDING PERMIT APPLICATION
- ARCHITECTURAL
- STRUCTURAL
- ELECTRICAL
- MECHANICAL
- PLUMBING
- ACCESSIBILITY (Details and elevations of restrooms, checkout counters, etc. and routes with elevations for all accessibility)
- ENERGY CALCULATIONS WITH HVAC & LIGHTING (COM CHECK OR IECC)
- ALL SIGNAGE (TACTILE EXIT, RESTROOM, ETC.)
- USE GROUP(S) (EACH AREA OR ROOM) (IBC. Chapter 3)
- BUILDING LIMITATION (HEIGHT & AREA) (IBC. Chapter 5)
- TYPE OF CONSTRUCTION (IBC. Chapter 6)
- FIRE RESISTANT MATERIALS & CONSTRUCTION (IBC. Chapter 7)
- FIRE PROTECTION SYSTEM(S) (IF REQUIRED) (IBC. Chapter 9)
- OCCUPANT LOAD (EACH AREA OR ROOM) (IBC. Section 1004)
- DEPARTMENT OF HEALTH APPROVAL FOR HEALTH CARE FACILITIES PRIOR TO SUBMISSION.
  
- SPECIAL INSPECTIONS AS PER IBC SECTION 1704 & 1710.



**THIS FORM REQUIRES A NOTARY SEAL**

**AFFIDAVIT OF EXEMPTION**

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:

\_\_\_\_\_ 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 of insurance to the municipality.

\_\_\_\_\_ Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (attach copies of religious exemption letter for all employees).

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

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

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

Subscribed, sworn to and  
acknowledged before me by the above  
\_\_\_\_\_ this \_\_\_\_\_ Day  
of \_\_\_\_\_  
20 \_\_\_\_\_.

**SEAL**

\_\_\_\_\_  
Notary Public