

## Borough of Boyertown

### UCC BUILDING PERMIT APPLICATION INSTRUCTIONS

Scott Reeser, Bursich Associates is the Building Code Official and all building permit and inspection related questions should be directed to him at 610-916-7179. Scheduling of all inspections can be completed by contacting any of the receptionists from Technicon at 610-916-7179.

Listed below are some basic instructions for building permit application submission. These instructions are in addition to completion of the basic application that is attached to this cover sheet.

#### **RESIDENTIAL BUILDING PERMIT APPLICATIONS**

- All residential building permit applications must be submitted with two (2) complete sets of building plans. These plans should include all architectural and structural details, including door and window schedules, along with plumbing, mechanical and electrical details and specifications.
- Site plans for each project must also be submitted in duplicate.
- Residential building plans are not required to be prepared by a design professional, however all building plans must be drawn to a minimum of a 1/4" scale.
- An Energy Conservation Code compliance certificate or equivalent must be submitted all applications for new construction.
- Be advised, that the UCC permits a 15 business day review period for all residential building permit applications. No work shall begin on any project until a building permit has been issued.
- A copy of the approval letter for erosion and sedimentation control from the Berks County Conservation District should also be submitted, if applicable.
- A Certificate of Workman's Compensation Insurance must be submitted with the application.

#### **COMMERCIAL BUILDING PERMIT APPLICATIONS**

- All commercial building permit applications must be submitted with two (2) complete sets of building plans. These plans should include all architectural and structural details, along with plumbing, mechanical, electrical, fire protection and accessibility details and specifications.
- **ALL BUILDING PLANS FOR COMMERCIAL PROJECTS MUST BE PREPARED, STAMPED AND SEALED BY EITHER A REGISTERED ARCHITECT OR A LICENSED PROFESSIONAL ENGINEER LICENSED IN THE COMMONWEALTH OF PENNSYLVANIA.** There is no exception to this law regardless of project size.
- Site plans for each project must also be submitted in triplicate.
- Full engineering data and calculations must be submitted with all commercial building permit applications. These would include, but are not limited to: fire protection calculations, HVAC ventilation schedules, plumbing fixture unit calculations, fuel gas pipe sizing calculations, etc.
- An Energy Conservation Code compliance certificate or equivalent must be submitted all applications for all new construction.
- A copy of the approval letter for erosion and sedimentation control from the Berks County Conservation District should also be submitted, if applicable.
- Be advised, that the UCC permits a 30 business day review period for all commercial building permit applications. No work shall begin on any project until a building permit has been issued.
- A Certificate of Workman's Compensation Insurance must be submitted with the application.

Upon issuance of a building permit, a permit placard along with supporting documentation will be returned to the permit applicant upon payment of permit fees. This placard will detail all required inspections that are specific to the project for which the permit has been issued. Any questions concerning the inspection schedule should be directed to Jeff Young at Technicon.

# UNIFORM CONSTRUCTION CODE BUILDING PERMIT APPLICATION

## LOCATION OF PROPOSED WORK OR IMPROVEMENT

Building Permit # \_\_\_\_\_

County: \_\_\_\_\_ Municipality: \_\_\_\_\_ Zoning District \_\_\_\_\_

Site Address: \_\_\_\_\_ Tax Parcel # \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision/Land Development: \_\_\_\_\_ Phase: \_\_\_\_\_ Section: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Principal Contractor: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

Architect: \_\_\_\_\_ Phone # \_\_\_\_\_ Fax # \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Cell: \_\_\_\_\_

## TYPE OF WORK OR IMPROVEMENT (Check All That Apply)

- |  |                                   |                                     |                                     |                                     |                                     |
|--|-----------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> New Building  | <input type="checkbox"/> Addition | <input type="checkbox"/> Alteration | <input type="checkbox"/> Repair     | <input type="checkbox"/> Demolition | <input type="checkbox"/> Renovation |
| <input type="checkbox"/> Change of Use | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Mechanical | <input type="checkbox"/> Electrical |                                     |                                     |

Describe the proposed work: \_\_\_\_\_  
\_\_\_\_\_

ESTIMATED COST OF CONSTRUCTION (reasonable fair market value) \$ \_\_\_\_\_

## DESCRIPTION OF BUILDING USE (Check One)

### RESIDENTIAL

- One-Family Dwelling (R-3)  
 Two-Family Dwelling (R-3)

### 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 Condition (i.e., electric, gas, oil, etc.)

Water Service: (Check)  Public  Private (Well Permit# \_\_\_\_\_)

Sewer Service: (Check)  Public  Private (Sewage Permit # \_\_\_\_\_)

## Does or will your building contain any of the following:

- Fireplace(s): Number \_\_\_\_\_ Type of Fuel \_\_\_\_\_ Type Vent \_\_\_\_\_  
 Elevator/Escalators/Lifts/Moving walks: (Check)  YES  NO  
 Sprinkler System:  YES  NO  
 Pressure Vessel:  YES  NO  
 Refrigeration Systems:  YES  NO

**FLOODPLAIN**

Is the site located within an identified flood hazard area? (Check One)  
Will any portion of the flood hazard area be developed? (Check One)

YES     NO  
 YES     NO     N/A

**Owner/Agent shall verify that any proposed construction and/or development 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**

Lowest Floor Level: \_\_\_\_\_

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 (Uniform Construction Code) and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

**Application for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.**

**I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.**

**I/WE HAVE RECEIVED A COPY OF THE REQUIRED INSPECTIONS AND ARE FULLY AWARE OF THESE REQUIREMENTS.**

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\_\_\_\_\_  
Print Name of Owner or Authorized Agent

\_\_\_\_\_  
Address

\_\_\_\_\_  
Date

Directions to Site: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# FOR CODE ADMINISTRATOR USE ONLY

## ADDITIONAL PERMITS/APPROVALS REQUIRED

<input type="checkbox"/> STREET CUT/DRIVEWAY	APPROVED	_____
<input type="checkbox"/> PENNDOT HIGHWAY OCCUPANCY	APPROVED	_____
<input type="checkbox"/> DEP FLOODWAY OR FLOODPLAIN	APPROVED	_____
<input type="checkbox"/> EROSION AND SEDIMENT CONTROL PLAN	APPROVED	_____
<input type="checkbox"/> SEWER CONNECTION	APPROVED	_____
<input type="checkbox"/> ON-LOT SEPTIC	APPROVED	_____
<input type="checkbox"/> ZONING	APPROVED	_____
<input type="checkbox"/> PUBLIC WATER CONNECTION	APPROVED	_____
<input type="checkbox"/> OTHER _____	APPROVED	_____

## APPROVALS

BUILDING PERMIT DENIED:	Date _____	Date Returned _____
BUILDING PERMIT APPROVED:	Date _____	Permit # _____
CODE ADMINISTRATOR _____		
Date Issued _____	Date Expires _____	Permit # _____
BUILDING PERMIT FEE	\$ _____	Receipt # _____
ZONING PERMIT FEE	\$ _____	Receipt# _____
PLUMBING PERMIT <i>(if appl.)</i>	_____	Receipt # _____
MECHANICAL PERMIT <i>(if appl.)</i>	_____	Receipt # _____
ELECTRICAL PERMIT <i>(if appl.)</i>	_____	Receipt # _____
DRIVEWAY PERMIT <i>(if appl.)</i>	_____	Receipt # _____
CURB AND SIDEWALK <i>(if appl.)</i>	_____	Receipt # _____

## PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

Type of documents:	Submitted	Signed & Sealed	Date:	Revision Date:
Foundation Plans	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Construction Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Electrical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Mechanical Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Plumbing Drawings	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Specifications	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Flood Hazard Area Data	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	_____
Workers Comp. Certificate	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> 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 the Largest Floor: _____ sq.ft.