Conestoga Township

3959 Main Street
Conestoga, PA 17516

Commercial Application for a Building/Zoning Permit

Third Party Plan Review and Code Inspection Agency	**TOWNSHIP USE ONLY**
COMMONWEALTH CODE INSPECTION SERVICE** **Attn: Pete Kingsley** 176 Doe Run Road Manheim, PA 17545 Phone: (717) 278-0964 ***Also fill out Commonwealth Code Inspection Service's Commercial Permit Application *(attached)	**Twp Administrative Fee *(non-refundable)*: $ 25.00** ***(Due at time of application submission)*** ***Twp Application Fee *(non-refundable)*: $ 85.00** ***(Due at time of application submission & applied to overall cost of permit)*** Zoning Permit Fee: $ _____ UCC Administrative Fee: $ _____ UCC Training Fee: $ _____ Certificate of Occupancy: $ _____ Stormwater: $ _____ **Total of All Fees: $ _____** ***Less Application Fee:** $ - 85.00 **TOTAL AMOUNT DUE: $_____** Received Date: _____ Complete Date: _____ Issue Date: _____

PERMIT NUMBER: _____ (To Be Completed by Township)

TAX PARCEL ACCOUNT NUMBER: 120 - _____ **ZONING DISTRICT:** _____

SITE INFORMATION

Project Name _____

Street Address _____

City _____ State _____ Zip Code _____

APPLICANT

Name of Applicant _____

Address of Applicant _____

City _____ State _____ Zip Code _____

Phone # _____ Email _____

OWNER OF RECORD

Name of Owner _____

Address of Owner _____

City _____ State _____ Zip Code _____

Phone # _____ Email _____

APPLICATION TYPE AND USE

- ☐ Accessibility Only Review
- ☐ Alteration or Renovation
- ☐ New Structure or Facility
- ☐ Plan Revision
- ☐ Unapproved Existing Building
- ☐ New Building

Use/Occupancy Classification _____

_____

Type of Construction _____

PROJECT INFO

Brief Description of Project _____

_____

Cost of Construction $_____

Height _____ Length _____ Width _____ Total Square Feet (L x W) _____

Proposed Impervious _____ square feet

Proposed Earth Disturbance _____ square feet

DESIGN PROFESSIONAL

Name _____ Seal (required)

Address _____

_____

PA License # _____

Email _____

Phone _____

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 assume 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 hereby authorize the designated Township officials to enter on the property and to investigate, inspect, and examine the Property set forth herein, including land and structures, to determine compliance with the Construction Code and/or Zoning Ordinance and to determine the accuracy of the statements contained herein.

I am aware that I cannot commence excavation or construction until the Township has issued a Building or Zoning Permit. By signing this Application, I certify that all facts in the Applicant and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of the Township, and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

I expressly acknowledge that the issuance of a Building or Zoning Permit is based upon the facts stated and representations made in this Application. I expressly acknowledge that the Township may revoke a Building or Zoning Permit if the use and/or structure for which it has been issued violate any applicable Township, County, State or Federal law or regulation. I also expressly acknowledge that the Township may revoke a Building or Zoning Permit if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

I acknowledge that the holder of a Building or Zoning Permit is responsible to ensure compliance with all applicable Township Ordinances during and at completion of the work authorized by the Permit. I acknowledge that the Township requires a final inspection be performed by the construction code official and that the Township issue a certificate of occupancy before the structure which is authorized by this permit may be occupied**.**

It is my responsibility to ensure that this inspection is scheduled and the certificate of occupancy obtained before the structure may be occupied. I acknowledge that if I occupy or permit the occupancy of this structure prior to the issuance of a certificate of occupancy under the Construction Code and/or Zoning Ordinance, I will have committed a violation of the Construction Code and will be subject to the penalties and remedies in the Construction Code Ordinance. I also acknowledge that, if the structure is occupied prior to the final inspection, work may have to be removed and re-executed in order that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound hereby, I agree to pay the fee established by the Township for delinquent inspections.

Nothing contained in this Application shall be construed to relieve or limit the obligations of the Applicant to comply with all provisions of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township ordinances or to stop the Township from enforcing Township ordinances, including but not limited to the Zoning Ordinance. I expressly acknowledge that permits and certificates of use and occupancy may be required under the Zoning Ordinance and it is my obligation to obtain all permits and approvals the Zoning Ordinance requires before the structure, which is authorized by the Building Permit, may be occupied.

SIGNATURE REQUIRED

Applicant's Signature _____ Date _____

Owner's Signature _____ Date _____
(if different from Applicant)

The signatory hereby agrees that all administrative/application permit fees shall be due the municipality upon submission of the application regardless of permit issuance status. Furthermore, all permit fees are due within 15 days of issuance by the municipality.

If the applicant is a contractor:

1. A contractor within the meaning of Act 44 of the Pennsylvania Workers' Compensation Law

   ☐ Yes ☐ No

   If the answer is Yes, complete Sections A **OR** B below, as appropriate

A. Insurance Information:

Name of Applicant _____

Federal or State Employer Identification Number _____

Applicant is a qualified self-insurer for Workers' Compensation

☐ Certificate attached

Name of Workers' Compensation Insurer _____

Workers' Compensation Insurance Policy Number _____

Workers' Compensation Insurance Policy Expiration Date _____

--OR--

B. Exemption:

Contractor is not required to provide Workers' Compensation Insurance under the provisions of Pennsylvania 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.

☐ Religious exemption under the Workers' Compensation Law.

Submit all applications & required fees to Solanco Engineering at the address/email below.

ALL APPLICATIONS MUST BE SUBMITTED WITH:

- 2 sets of stamped construction drawings
- A site plan that includes distances from proposed structure to all property lines
- Accessibility information (parking, accessible route)
- Signature of property owner
- **All application submittals must include the NON-REFUNDABLE administrative and application fees of $110.00, in the form of a check or money order, made payable to Conestoga Township**

MAIL OR DROP OFF TO:

Solanco Engineering Associates, LLC
103 Fite Way, Suite C
Quarryville, PA 17566

Phone: (717) 786-0355 **Fax: (717) 806-5748**

***Email:** **permits@solancoengineering.com**

If submitting via email, please note that the review of the permit application will not begin until the above-mentioned non-refundable fee is received.

ANY APPLICATION WITH MISSING INFORMATION OR REQUIRED DOCUMENTS WILL BE RETURNED AS INCOMPLETE.

SITE PLAN

PLEASE SHOW IMPROVEMENT PROPOSED AND DIMENSIONS TO PROPERTY LINES AND CENTERLINE OF ROADWAY

Commonwealth Code Inspection Services

Submittal Guide for Commercial Projects
Building Plan Requirements for Commercial Projects

The following items are required for new commercial projects. Drawings should be drawn to ¼ in. or 1/8 in. scale and shall provide the necessary information to verify compliance with the building code.
All drawings shall bear the stamp and signature of the design professional responsible for the design.
Two (2) sets of construction drawings shall be submitted and shall include:

Title Page Drawing; to include the contact information for all design professionals, description of square footage per floor, number of floors, type of construction to be utilized, area modifications utilized, use group classification(s), separation or non- separation of mixed use groups, design occupant load(s), finish materials classification, design codes utilized.

Site Plan Drawings; to include all utility layouts, handicap parking & access, designated fire lanes, distance between adjacent structures and property lines.

Floor Plan Drawings; to include the use of all areas, location & types of fire resistant construction, U.L. Listing of fire resistant construction, means of egress components, handicap access.

Structural Drawings; to include the structural design calculations, geo-technical engineering report, uniform live loads, dead loads, roof & snow loads, wind loads, footing construction detail, foundation construction details, framing construction details, concrete construction details, masonry construction details, wood construction details, steel construction details.

Electrical Drawings; to include all lighting facilities, electrically operated equipment, and electrical circuits required for all service equipment of the building or structure. Drawings should include panel schedules, grounding systems, and wiring methods.

Mechanical Drawings; to include size & type of appliances, construction of flues and chimney systems, ventilation air provided, fresh air make-up provided, location of all ducting and piping.

Plumbing Drawings; to include a plan view and a riser diagram of waste & water piping, pipe sizing, grade of piping, drainage fixture unit loads on stacks and drains, water distribution design criteria.

Fire Protection Systems; to include the submittal guide for each type of system. See specific submittal guide requirements.

Date____/____/_____

APPLICATION FOR PLAN REVIEW
&
APPLICATION FOR COMMERCIAL BUILDING PERMIT

FAILURE TO FILL OUT THE PERMIT APPLICATION COMPLETELY MAY RESULT IN DELAYS OR REJECTION OF APPLICATION

Municipal Tracking #

Permit #

Plan Review #

PROPERTY ADDRESS

Street Address:	Parcel	Zoning
Subdivision:	Lot	Type
Municipality	County	

OWNER ADDRESS

Last name or Business	First name	Phone Fax	
Address	City	State	Zip

TYPE OF APPLICATION

☐ Building ☐ Electrical ☐ Accessibility ☐ Fire Alarm ☐ Other
☐ Plumbing ☐ Mechanical ☐ Fire Suppression ☐ Occupancy

Type of Work (Check all that apply)

☐ New Construction
☐ Additional construction
☐ Alteration/Structural/Egress Change
☐ Repair/Renovation ☐ IBC ☐ IEBC (1☐ 2☐ 3☐)
☐ Foundation Permit
☐ Change of Use/Occupancy
☐ Initial Certificate of Occupancy

Type of Construction
(Check all that apply)

☐ IA ☐ IV
☐ 1B
☐ IIA ☐ VB
☐ IIB ☐ VA
☐ IIIA ☐ Separate Use
☐ IIIB ☐ Non-separated Use

Previous L&I Certificate #(s)

PROPOSED CODE/YEAR
FOR THIS PROJECT

Use Group (List all)

☐ A1	☐ H1	☐ R1
☐ A2	☐ H2	☐ R2
☐ A3	☐ H3	☐ R3
☐ A4	☐ H4	☐ R4
☐ A5	☐ H5	
		☐ S1
☐ B	☐ I1	☐ S2
	☐ I2	
☐ E	☐ I3	☐ U
	☐ I4	
☐ F1		
☐ F2	☐ M	

Fire Separation

☐ Single Use

☐ Separated Uses

☐ Non-separated Mixed Use

☐ Incidental Use
Main Use_____

Fire Suppression (List all)

Type:
☐ Wet (Water)
#_____Standard_____

☐ Dry (Water)
#_____Standard_____

☐ Chemical
#_____Standard_____

Type_____

Start Date	Finish Date	Total Value of All Work

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Description of proposed project:

Electrical Permit Information

Electrical Service Size

_____Amps Power Company Name_____

_____Volts Power Company Job #_____

_____Ø

General outlets: _____120 volt _____240 volt

Circuits: _____2 wire _____3 wire _____4 wire

Device Name	Watts	Amps	#	Device Name	Watts	Amps	#

Start Date	Finish Date	Value of work

Plumbing Permit Information

Water Service Size

Water Company Name_____

_____In. Dia. Water Company Job #_____

_____Pressure at main (PSI) _____Supply at main (GPM)

Supply branches: _____Hot _____Cold Total Demand: GPM_____ PSI_____

Fixture Name	GPM	PSI	#	Fixture Name	GPM	PSI	#

☐ **Sewer** Sewer Company Name_____ Job #_____

Size of Main_____ in. Size of Lateral_____ in. Capacity of System_____ dfu

☐ **Septic** S.E.O. Name_____ Job #_____

Size of Tank_____ gal. Size of Lateral_____ in. Capacity of System_____ dfu.

Size of Building Drain_____ in. Total Calculated Outflow _____ dfu

Fixture Name	Drain (in)	Vent(in)	DFU	Fixture Name	Drain (in)	Vent(in)	DFU

Grease Trap _____ gal. Garbage Disposal #_____ Air Admittance Valve #_____ Back Flow Preventer #_____

Start Date	Finish Date	Value of Plumbing Work

Mechanical Permit Information

Number of systems	Type(s)			
SYSTEM	BTU	FUEL	VENT TYPE (+R-?)	FUNCTION (Heat? Cool? Water? Vent?)

Fuel Gas? □ yes □ no Public? □ yes □ no Piping Type(s)_____

Oil? □ yes □ no Tank Capacity?_____ Underground? □ yes □ no

Electric? □ yes □ no Total KW_____

Duct Detectors? □ yes □ no Number of Zones?_____ Type?_____

Kitchen Hood? □ yes □ no Fire Suppression System? □ yes □ no Type?_____

Hazardous Exhaust? □ yes □ no Fire Suppression System □ yes □ no Type?_____

Fire Dampers? □ yes □ no Smoke Dampers □ yes □ no

Smoke Control System? □ yes □ no Governing Code Section(s)_____

Regular Exhaust Fans? □ yes □ no Number?_____ Duct Type(s)_____

Fireplace? □ yes □ no Number?_____

Gas? □ yes □ no Piping Type_____ Vent Type_____

Masonry? □ yes □ no Material Type_____ Chimney Type_____

Electric? □ yes □ no Kw?_____

Start Date	Finish Date	Value of work

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Fire Alarm Permit Information

Requiring Code Section_____

Type(s) of Wiring_____

Battery Back Up □ yes □ no Generator □ yes □ no

Number of Zones_____

Type(s) of System(s)_____

Type(s) of Detectors(s)_____
Smoke, heat, infrared, ultraviolet, etc.

Types of Special Applications_____

Types of Initiating Tests_____

Start Date	Finish Date	Value of Work

Fire Suppression System Permit

Requiring Code Section(s)_____ Number of Systems_____

Design:	NFPA 13	□ yes	□ no	Wet System	□ yes	□ no	Number_____
	NFPA 13R	□ yes	□ no	Dry System	□ yes	□ no	Number_____

System Type	Piping Type	System Design Pressure (PSI)	System Design Capacity (GPM)

Alternate Systems □ yes □ no Pre-action □ yes □ no Number of Systems_____

System Type	Chemical	Capacity	Reference Standard(s)

Start Date	Finish Date	Value of Work

PROPOSED DEFERRED SUBMITTALS

□ Foundation Permit ETA ____/____/____

□ Structural Steel ETA ____/____/____

□ Fire Suppression ETA ____/____/____

□ Fire Alarm ETA ____/____/____

□ Roof Truss ETA ____/____/____

□ Floor Truss ETA ____/____/____

□ Spec Books ETA ____/____/____

Design Professional in Responsible Charge

Name: _____

Registration Number _____

Seal:

FAILURE TO FILL OUT THE PERMIT APPLICATION COMPLETELY MAY RESULT IN DELAYS OR REJECTION OF APPLICATION

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record, and I agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code Official or his delegated representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project.

Applicant _____ **Date** _____ **Phone** _____

Fax _____ **Email** _____ **Mobile** _____

PERSONNEL

General Contractor

General Contractor _____

Contact Person _____ Are there other prime contractors? □ yes □ no If yes, list separately.

Street Address _____

City _____ State _____ Zip _____

Phone _____

Mobile _____

Fax _____

Email

Architect

Architect in Responsible Charge _____

Lead Architect _____ Contact Person _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Mobile _____

Fax _____

Email

Structural Engineer

Firm _____

Lead Engineer _____ Contact Person _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Mobile _____

Fax _____

Email

Electrical Engineer

Firm _____

Lead Engineer _____ Contact Person _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Mobile _____

Fax _____

Email

Mechanical Engineer

Architect in Responsible Charge

Lead Architect Contact Person

Street Address

City State Zip

Phone

Mobile

Fax

Email

Plumbing Engineer

Firm

Lead Engineer Contact Person

Street Address

City State Zip

Phone

Mobile

Fax

Email

Fire Alarm Engineer / Designer

Firm

Lead Engineer/Designer Contact Person

Street Address

City State Zip

Phone

Mobile

Fax

Email

Fire Suppression Engineer / Designer

Firm _____

Lead Engineer _____ Contact Person _____

Street Address _____

City _____ State _____ Zip _____

Phone _____

Mobile _____

Fax _____

Email

NOTICE

All work, whether or not shown on the construction documents shall comply with the Pa. UCC (IBC and IRC 2003 as referenced). Work not shown will be field checked to determine compliance. Construction documents shall be on site at time of inspection; if not the inspection may be failed, at the discretion of the inspector, for failure to have them available for reference purpose.

Universal accessibility to all services, goods, events, and functions offered within the Commonwealth of Pennsylvania is a guaranteed civil right. Please review your construction documents to insure that right has not been violated. Basic compliance with *all* of the provisions of the standard ANSI A117.1 can help to insure that all of our citizens enjoy access to the goods and services offered within the state. Compliance with the provisions of IBC Chapter 11 and ANSI A117.1 will be field verified and shall be mandatory for receipt of a Certificate of Occupancy. Full compliance with accessibility provisions of the codes is mandatory. Failure to include provisions for compliance on the plan, or in the execution of the work is not an excuse to deny basic accessibility to our citizens.

A list of inspections that *probably* will be required, based on the permit application and plan submission, can be obtained from the Code Official at the time of permit issuance. Noted inspections may be waived or additional inspections may be required, at the discretion of the Code Official, as deemed necessary in order to insure Code Compliance. Inspection approval must be obtained for the work currently complete before proceeding to the next step of construction listed in order for each trade.

All inspections will be conducted by Commonwealth Code Inspection Service, with the exception of special inspections required by the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional; or as otherwise directed by the authority having jurisdiction. Special inspections shall be performed per the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional.

A special inspection program list shall be furnished to Commonwealth Code Inspection Service for approval prior to the start of the project phase associated with the inspection. The list shall include name of company, corporate officers, address and other contact information, accreditation, and qualifications of individual inspectors.

The applicant or authorized representative must request all regular inspections directly through Commonwealth Code Inspection Service, Inc. with at least 24 hours notice.

Same day service for inspections may be provided if calls are received before 8:00 AM. Telephone 717-664-2347 (Main Office) or 800-732-0043 (In Pennsylvania) or Contact your local CCIS office at