



UCC CONSTRUCTION PERMIT APPLICATION INSTRUCTIONS

Dear UCC Construction Permit Applicant(s),

I have enclosed the following applications to obtain a UCC Construction Permit.

BUILDING/FIRE CODE APPLICATION **MECHANICAL/PLUMBING/ELECTRICAL APPLICATION**

Building Fire Mechanical Plumbing Electrical

Please **complete** the upper portion (general information) of the enclosed applications and the specific discipline technical information on the form as indicated above.

- **Two (2) sets of plans** are required to be submitted with the completed application and supplement information.
 - **RESIDENTIAL** – Homeowners are permitted to draw their own plans. All plans must be legible.
 - **COMMERICAL** – Plans must be sealed and signed by a design professional.
**Additional plans may be requested based on scope of project.

Plan requirements must confirm to UCC codes. Site plans (if applicable) must show building footprint and distances from lot lines, street rights-of-way and finished grades. Must submit manufacture specifications of all appliances.

The fees associated with the application are listed on the attached Fee Schedule. Please review the paragraph regarding municipal and state administrative fees. **We will contact you with the amount of the fees due upon receipt of the plans and applications.** No permits will be issued prior to receipt of all fees. If the work performed varies from the applications and/or plans or construction is started prior to issuance of permits, additional fees may be required, no Occupancy Permit will be issued until all fees have been paid in full. All fees are non-refundable.

The issuances of UCC Construction Permits do not individually authorize the start of construction until all other required permits are approved and obtained.

PLEASE NOTE THE FOLLOWING:

1. Non-residential construction may require Land Development Plan approval prior to approval of UCC Permit.
2. Obtain E&S Approval, when required from the Schuylkill Conservation District (570-622-3742).

When is an Erosion and Sediment Control (E&SC) Plan needed?

- As per the Chapter 102 Erosion and Sedimentation Control Regulations, development of an erosion and sediment control plan is required for all earth disturbances of 5,000 square feet or greater, earth disturbances in High Quality or Exceptional Value watersheds, or if other DEP permits require it. This would also include timber harvesting activities, which must submit a timber harvest E&SC plan.

ARRO Consulting, Inc.
1239 Centre Turnpike, Orwigsburg, PA 17961
Phone 570.366.9534 Fax 570.366.9537
shannon.darker@arroconsulting.com



- Projects having less than 5,000 square feet of earth disturbance are still required to develop, implement, and maintain erosion and sediment control best management practices (BMPs). They are only exempt from having a written plan. Additionally, persons proposing timber harvesting activities or road maintenance that disturb twenty-five (25) or more acres must apply for an Erosion and Sediment Control Permit.
 - Projects that disturb 1 acre or more require a National Pollutant Discharge Elimination System (NPDES) permit for Stormwater Discharges Associated with Construction Activities. As part of this permit, an approved E&SC plan is required.
3. Obtain a Public Sewage Permit or-On-lot Sewage Disposal Permit.
 4. Obtain a Driveway Permit from Township/Borough and/or PennDOT.
 5. Obtain an approved Zoning Permit from Township/Borough/County.
 6. The Zoning and/or Building Permit shall expire within six months if the permitted work has not begun or after two (2) years if the work has not been completed.
 7. Additional permit requests may be required as part of the proposed construction activities and issuance of other permits required by the township/borough.
 8. The Building Officer will make compliance inspections during the construction process to determine compliance with all permits and ordinances. **Right of entry for inspection of the improvements is a condition attached to all permits issued.**
 9. If compliance is confirmed by inspection, a Use and Occupancy Certificate shall be issued. It is unlawful to use and/or occupy any structure, building, and/or land or portion thereof without this certificate.
 10. Failure to present true and correct information on any and all applications may result in the revocation of all permits.
 11. Incomplete or missing application information and/or incomplete plan submittals will delay permit processing.
 12. Once the permit is approved, the approved information will be **forwarded via email** unless specified otherwise. The issued permit must be posted in a conspicuous place on the premises.

ALL APPLICATIONS AND FEES CAN BE FORWARDED TO:

**ARRO Consulting, Inc.
1239 Centre Turnpike
Orwigsburg, PA 17961**

If you have any questions regarding the UCC Construction Applications, please do not hesitate to contact us at **570.366.9534 or shannon.darker@arroconsulting.com**

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PERMIT APPLICATION

Non UCC _____

Page ___ of ___

Building Permit _____ Fire Protection Permit _____

Municipality _____ County _____

Construction Site Location (Full Address) _____

Tax Map Parcel ID# _____

Owner _____

Application Contact _____

Company Name _____

Application Company _____

Address _____

Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone # _____ Cell # _____

Phone # _____ Cell # _____

Email _____

Email _____

Describe Proposed Work in Detail: _____

BUILDING PERMIT

Contractor _____
(If owner put same as above)

Of Stories _____ Height of Structure _____

Address _____

Total SQ FT _____

City _____ State _____ Zip _____

Use Group _____ Type Const. _____

Phone # _____ Cell _____

Description of Work: _____

Email _____

HIC # _____

Other: _____

Federal Employee# _____

(Certification of Insurance for Worker Compensation needed or sign exemption form)

State Classification:

New Residential _____ Other Residential _____

New Commercial _____ Other _____

Commercial _____

Estimate Total Costs For All Work: _____
(Reasonable Fair Market Value)

FIRE PROTECTION PERMIT

Contractor _____
(If owner put same as above)

Sprinkler System: _____

Address _____

Alarm System: _____

City _____ State _____ Zip _____

Phone # _____ Cell _____

Email _____

HIC # _____

Federal Employee# _____

(Certification of Insurance for Worker Compensation needed or sign exemption form)

State Classification:

New Residential _____ Other Residential _____

New Commercial _____ Other _____

Commercial _____

Commercial Cooking Equip.: _____

Other: _____

Estimate Total Costs For All Work: _____
(Reasonable Fair Market Value)

I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.

Print Name: _____ Signature: _____

Owner () Application Contact () Contractor () Owner Representative ()

CODE OFFICIAL USE ONLY

UCC Building Fee: _____

Plans Approved

Plan Review Fee: _____

FP Fee: _____

Plans Approved with Comments

Admin Fee: _____

Code Official: _____

State Fee: _____

Total UCC: _____

State Cert. #: _____

Total Cost: _____

Date: _____

PERMIT APPLICATION

Non UCC _____

Page ___ of ___

Mechanical Permit _____ Plumbing Permit _____ Electrical Permit _____

Municipality _____ County _____

Construction Site Location (Full Address) _____

Tax Map Parcel ID# _____

Owner _____

Application Contact _____

Company Name _____

Application Company _____

Address _____

Address _____

City _____ State _____ Zip _____

City _____ State _____ Zip _____

Phone # _____ Cell # _____

Phone # _____ Cell # _____

Email _____

Email _____

Describe Proposed Work in Detail: _____

MECHANICAL / PLUMBING PERMIT

Contractor _____ <small>(If owner put same as above)</small>		Water: Public _____ On-lot _____		
		Sewer: Public _____ On-lot _____		
Address _____		<u>Technical Site Data</u>		
City _____	State _____ Zip _____	No. _____	Size _____	Fixture/Equip. _____
Phone # _____	Cell # _____	_____	_____	Water Closet _____
Email _____		_____	_____	Urinal/Bidet _____
HIC # _____		_____	_____	Bathtub _____
Federal Employee# _____		_____	_____	Lavatory _____
<small>(Certification of Insurance for Worker Compensation needed or sign exemption form)</small>		_____	_____	Shower _____
State Classification _____		_____	_____	Sink _____
New Residential _____	Other Residential _____	_____	_____	Dishwasher _____
New Commercial _____	Other Commercial _____	_____	_____	Washing Mach. _____
		_____	_____	Hose Bib _____
		_____	_____	Water Heater _____
Estimate Total Costs For All Work: _____		Others: _____		
<small>(Reasonable Fair Market Value)</small>				

ELECTRICAL PERMIT

Contractor _____ <small>(If owner put same as above)</small>		<u>Technical Site Data</u>		
Address _____		No. _____	Size _____	Fixture/Equip. _____
City _____	State _____ Zip _____	_____	_____	Lighting Fixture _____
Phone # _____	Cell# _____	_____	_____	Receptacles _____
Email _____		_____	_____	Switches _____
HIC # _____		_____	_____	Detectors _____
Federal Employee# _____		_____	_____	Motor-Fraction. _____
<small>(Certification of Insurance for Worker Compensation needed or sign exemption form)</small>		_____	_____	Comm. Devices _____
State Classification _____		_____	_____	Alarm Dev./Sys. _____
New Residential _____	Other Residential _____	Unit _____	_____	Pool Bonding. _____
New Commercial _____	Other Commercial _____	_____	_____	Service _____
		_____	_____	Sub-Panels _____
Estimate Total Costs For All Work: _____		Others: _____		
<small>(Reasonable Fair Market Value)</small>				

I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.

Print Name: _____ Signature: _____
 Owner () Application Contact () Contractor () Owner Representative ()

CODE OFFICIAL USE ONLY

	<u>Mechanical</u>	<u>Plumbing</u>	<u>Electrical</u>
UCC Fee:	_____	_____	_____
Plan Review Fee:	_____	_____	_____
Admin Fee:	_____	_____	_____
State Fee:	_____	_____	_____
Total Cost:	_____	_____	_____
Non-UCC Fee:	_____	_____	_____

- Plans Approved
- Plans Approved with Comments

Code Official: _____
 State Cert. #: _____
 Date: _____

PENNSYLVANIA WORKERS COMPENSATION INSURANCE COVERAGE AFFIDAVIT OF EXEMPTION

Basis for exemption is (please check one):

- The Contractor for this building permit is a sole proprietorship without employees
- The Contractor is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act. Please explain: _____
- All of the contractor's employees on the project are exemption religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain: _____
- Owner is the contractor _____
- Other. Please explain: _____

Please be aware of the following requirements under the Pennsylvania Workers' Compensation Act:

- ⇒ Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
- ⇒ Violation of the Workers' Compensation Act or the terms of this information form will subject the contractor to a stop-work order and other fines and penalties as provided by law.

My signature on behalf of or as the contractor as stated on this form constitutes my verification that the statements contained here are true.

Signature _____ Date _____

Name (Please Print) _____

Title _____

Name of Company _____

Address _____

Phone _____