

NEW FREEDOM BOROUGH

49 E. HIGH ST

NEW FREEDOM, PA 17349

PHONE: (717) 235-2337 FAX: (717) 235-0281

Uniform Construction Code (UCC) / 2006 International Series

APPLICATION FOR BUILDING PERMIT

**THIS PERMIT APPLICATION MUST BE ACCOMPANIED BY
TWO (2) SETS OF DESIGN DRAWINGS INCLUDING ALL STRUCTURAL
COMPONENTS, PLUMBING AND MECHANICAL DETAILS.**

Use/Occupancy Classification (Please check all that apply)	<input type="checkbox"/> A-1 <input type="checkbox"/> A-2 <input type="checkbox"/> A-3 <input type="checkbox"/> A-4 <input type="checkbox"/> A-5 <input type="checkbox"/> B <input type="checkbox"/> E <input type="checkbox"/> F-1 <input type="checkbox"/> F-2 <input type="checkbox"/> H-1 <input type="checkbox"/> H-2 <input type="checkbox"/> H-3 <input type="checkbox"/> H-4 <input type="checkbox"/> H-5 <input type="checkbox"/> I-1 <input type="checkbox"/> I-2 <input type="checkbox"/> I-3 <input type="checkbox"/> I-4 <input type="checkbox"/> M <input type="checkbox"/> R-1 <input type="checkbox"/> R-2 <input type="checkbox"/> R-3 Adult Care <input type="checkbox"/> R-3 Child Care <input type="checkbox"/> R-3 <input type="checkbox"/> R-4 <input type="checkbox"/> S-1 <input type="checkbox"/> S-2 <input type="checkbox"/> U
Owner Information	Owner Name _____ Street Address _____ City _____ State _____ Zip Code _____ Phone Number _____
Contractor	(Name/Address/Phone) _____ Contractor Registration # _____
Project Information	Site Address _____ Lot # _____ Lot Area: _____ Sq.Ft. Proposed setbacks (ft): Front _____ Rear _____ Sides: ___ Right ___ Left Area of Proposed Structure: _____ Sq. Ft. Area of all Existing Structures: _____ Sq.Ft. Area of all other Impervious Cover (see note below) _____ Sq.Ft. Note: Impervious cover includes sidewalks, driveways, decks, patios, etc. Swimming pools and attached decking are considered building coverage. AREA = LENGTH X WIDTH (not location) Is project in flood hazard area? ___ Yes ___ No If "yes," attach one of the flood hazard certifications mandated in section 1612.5 of the International Building Code. Estimated Cost of Construction (reasonable fair market value \$ _____ Start Date: _____ Completion Date: _____
Project Data	Provide a description of existing and or proposed use(s), with sufficient detail for determination of appropriate classification of occupancy type(s): _____ _____ _____
Type of Work or Improvement	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Relocation <input type="checkbox"/> Foundation Only <input type="checkbox"/> Plumbing <input type="checkbox"/> Mechanical <input type="checkbox"/> Change of Use <input type="checkbox"/> Deck

Building/Site Characteristics	<p>Number of Residential Dwelling Units: _____</p> <p>Existing _____ Proposed _____</p> <p>Height of Structure: _____ Ft.</p> <p>Mechanical: _____ (Indicate Type of Heating/Ventilating/Air Conditioning [i.e. electric, gas, etc.] and attach drawings showing design of system [vents, returns, R values, sizes, etc.]</p> <p>Fireplace(s): Number _____ Type of Fuel _____ Type Vent _____</p> <p>Elevator/Escalators/Lifts/Moving walks: _____ YES _____ NO</p> <p>Refrigeration Systems: _____ YES _____ NO</p> <p>Conditioned space _____ Sq.Ft.</p> <p>Unconditioned space _____ Sq.Ft.</p> <p>Number of Stories above grade _____ Sq.Ft.</p> <p>Does it have a basement: _____ Yes _____ No</p> <p>Total floor area _____ Sq.Ft.</p> <p>Floor area NEW construction _____ Sq.Ft.</p> <p>Floor area of ADDITION _____ Sq.Ft.</p> <p>Floor area of RENOVATION _____ Sq.Ft.</p> <p># of multi-family dwelling units _____</p> <p># of accessible dwelling units _____</p> <p>Type(s) of construction per Chapter 6 of the <i>International Building Code</i> (check all that apply):</p> <p>_____ IA _____ IB _____ IIA _____ IIB _____ IIIA _____ IIIB _____ IV _____ VA _____ VB</p> <p>Fire suppression: _____ Full _____ Partial _____ None</p> <p>If application applies to an existing building that is "legally occupied", indicate permits held:</p> <p>Fire and Panic Occupancy Permit File Number _____</p> <p>Municipal Occupancy Permit Permit Number _____</p> <p>L & I UCC Certificate of Occupancy File Number _____</p> <p>If "legally occupied", the building may comply with either code below (indicate choice):</p> <p>_____ <i>International Existing Building Code</i> _____ Chap. 34, <i>International Building Code</i></p> <p>Is this permit for a medical facility regulated by the Health Care Facilities Act? _____ Yes _____ No</p> <p>If "yes," please attach copy of plan approval issued by the PA Department of Health.</p>
Design Professional in Responsible Charge (affix seal to the right of name and address)	<p>Name: _____</p> <p>Address: _____</p> <p>PA License #: _____</p> <p>E-Mail: _____</p> <p>Phone: _____</p> <p>Fax: _____</p>

Special Inspection and Structural Observation Program	Is this construction exempt from the special inspection and structural observation requirements found in Sections 1704 and 1709 of the <i>International Building Code</i> ? _____ Yes _____ No If the work is <u>not</u> exempt, you must submit a copy of the Department's "SPECIAL INSPECTIONS & OBSERVATIONS STATEMENT" (UCC-6) with this application.
Alternative Construction Method/Material	Will an alternative construction method or material be used on this project? _____ Yes _____ No If "Yes," applicant or design professional must submit a signed statement indicating that the proposed method or material meets the requirements of 34 PA Code §403.44.

Applicant's Certification:

As the owner or the authorized agent of the project for which this application is filed, I certify that:

- 1 The description of use, 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 New Freedom Borough.
- 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 filed with New Freedom Borough.
- 5 If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to New Freedom Borough.
- 6 When required, up to 20% of the total cost of any work performed on an area of primary function in an existing building will be expended 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.
- 8 If signed by someone other than the construction owner, this work has been authorized by the owner of record and I have been authorized by the owner to complete this application on his behalf. I will be acting on behalf of the owner as:
 ___ARCHITECT ___ENGINEER ___CONTRACTOR ___AGENT/OTHER: _____

APPLICANT MUST COMPLETE ONE OF THE SECTIONS BELOW:

Applicant, if other than owner:

Applicant, if owner:

Name (typed or printed)

Name (typed or printed)

Phone: _____

Phone: _____

Mailing Address: _____

Mailing Address: _____

Signature

Date

Signature

Date

PLOT PLAN

DRAWING REQUIREMENTS

1. Sketch the lot, including dimensions showing proposed property line setbacks.
2. Sketch the proposed structure showing overall size relative to the location on the lot.
3. Include any and all utility easements and rights of ways that appear on the lot.
NO BUILDING ALLOWED ON BOROUGH EASEMENTS OR RIGHTS OF WAY
4. If excavation is required, the applicant must include a sedimentation and erosion control plan.
5. Applicable Building Codes are: ACT 45 Pennsylvania Uniform Construction Code and the New Freedom Borough Zoning Ordinance 1998 as amended.
6. THIS PERMIT APPLICATION MUST BE ACCOMPANIED BY TWO SETS OF DESIGN DRAWINGS. Including all structural components, plumbing, & mechanical details.

DRAWN BY: _____ DATE: _____ SCALE: _____