

Coplay Borough

Tracking # _____ Permit # _____

Uniform Construction Code (UCC)

APPLICATION FOR BUILDING PERMIT

Application Type	<input type="checkbox"/> Accessibility <u>ONLY</u> Review	<input type="checkbox"/> Addition
	<input type="checkbox"/> Alteration or Renovation	<input type="checkbox"/> New Building
	<input type="checkbox"/> New Structure/Facility	<input type="checkbox"/> Phase Approval
	<input type="checkbox"/> Plan Revision or Partial Occupancy Request	<input type="checkbox"/> Unapproved Existing Building

Use/Occupancy Classification	<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
Check box to left of applicable group	<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	<input type="checkbox"/> R-4	<input type="checkbox"/> S-1	<input type="checkbox"/> S-2	<input type="checkbox"/> U	

Check all that apply.

Site Information

Project Name _____

Street Name & # _____

Special Requirements & Documentation

Check each block below indicating that all of the following will be submitted with this application:

Three (3) site plans Three (3) complete sets of construction drawings

One (1) complete copy of the UCC-2 PLAN REVIEW CHECK LIST

One (1) set of specifications (only if **Addition, Alteration, New Building or New Structure/Facility**)

Does this construction involve modular units built in a factory? Yes No

If yes, submit 1 copy of a letter from a licensed design professional certifying that construction within the modular units (or the fully assembled modular building) and hidden from view will fully comply with all requirements of the UCC.

Is this construction regulated by the Health Care Facilities Act? Yes No

If Yes, submit 1 copy of approval letter from the Pennsylvania Department of Health.

Is this construction exempt from energy code requirements? Yes No

If yes, submit 1 copy of letter indicating that the building or structure will use neither electricity nor fossil fuels, and thus is exempt per ASHRAE 90.1, S 2.3(B)

If no, submit 1 copy of the COMcheck-EZ Certificate of the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.

Is project in flood hazard area? Yes No

If yes, submit 1 copy of one of the flood hazard certifications mandated in section 1612.5 of the International Building Code.

Are any of the International Building Code (chapter 17) special inspection or structural observations required? Yes No

If yes, submit 1 copy of the UCC-6 SPECIAL INSPECTIONS OBSERVATIONS STATEMENT.

Will an alternative construction method or material be used on this project? Yes No

If yes, submit a signed statement indicating that the proposed method or material meets the Requirements of 34 PA Code S 403.44.

Is this application for phased approval? Yes No If yes, submit a letter signed by the design professional and owner acknowledging that the issuance of a permit for phased construction provides no assurance that the Municipality will grant approval of any UCC permits needed to complete the construction, and that the design professional and owner will ensure that the building/structure fully complies with all UCC requirements before occupancy.

Project Data Lot Number _____ Block Number _____
 Minimum setbacks required by municipal zoning ordinance (in feet):
 Front _____ Rear _____ Right Side _____ Left Side _____
 Sq. St. of conditioned space _____
 Sq. Ft. of unconditioned space _____

Number of stories above grade _____
 Does it have a basement? Yes No
 Total floor area (sq. ft.) _____
 Floor area new construction (sq. ft.) _____
 Floor area of addition (sq. ft.) _____
 Floor area renovated (sq. ft.) _____
 # of multi-family dwelling units _____
 # of accessible dwelling units _____

Type (s) of construction per Chapter 6 of the International Building Code (check all that apply):
 I A I B II A II B III A III B IV VA VB
 Fire suppression: Full Partial None
 If application applies to an existing building that is "legally occupied", indicate permits held:
 Fire and Panic Occupancy Permit File # _____
 Municipal Occupancy Permit Permit # _____
 L&I UCC Certificate of Occupancy File # _____
 If "legally occupied," you must select which code requirements the building will comply with (choose only one)
 International Existing Building Code Chap. 34, International Building Code
 Electric Power Provider _____ Job # _____
 Gas Provider _____

Design Professional Name _____
 in Responsible Address _____
 Charge _____
 Seal **must** be in PA License # _____
 space to right of E-Mail _____
 name & address Phone # _____
 Fax # _____

Owner Information	Owner Name _____	Street Address _____	City _____	State _____	Zip Code _____
	Phone # _____				

Deferred Submissions If you are not submitting plans and other documentation for any of the items listed below with this application, check the appropriate box below and indicate this on the first page of each building plan set.

Fire Alarm System Truss Shop Drawings (certified)
 Sprinkler System

Applicant's Certification:

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

1. The 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 the Municipality.
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 the Municipality.
5. If the licensed architect or engineer in reasonable charge of this construction should change, written notice of the change will be provided to the Municipality.
6. When required, up to 20% of the total cost of any work performed on any area of primary function in an existing building will be expected 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.

Applicants Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone # _____

Applicant Signature _____ Date _____