



<b>Municipality:</b> _____
<b>Permit No.:</b> _____
<b>Date:</b> _____

## APPLICATION FOR COMMERCIAL BUILDING PERMIT.

<b>Site Information</b>	Facility Name (name of company, mall, institution, university, etc.): _____		
<b>Political Subdivision and County</b> names are required.	Building and/or Tenant Name _____		
	Street <b>Number</b> and <b>Name</b> _____		
	City _____ State _____ Zip Code _____		
	Political Subdivision: _____ County: _____		
<b>Application Type</b>	<input type="checkbox"/> Accessibility <b>Only</b> 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"/> Uncertified (Existing) Building		
<b>Use/Occupancy Classification:</b>	<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 <input type="checkbox"/> R-4 <input type="checkbox"/> S-1 <input type="checkbox"/> S-2 <input type="checkbox"/> U		
<b>Mandatory Documents</b>	Check each block below indicating that all of the following will be submitted with this application: <input type="checkbox"/> 3 site plans <input type="checkbox"/> (3) <b>assembled</b> and <b>bound</b> sets of construction drawings <input type="checkbox"/> One (1) completed copy of the PLAN REVIEW CHECKLIST		
<b>Special Requirements &amp; Documentation</b>	Does this construction involve modular units built in a factory?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Is this construction regulated by the Health Care Facilities Act?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If " <b>Yes</b> ," submit 1 copy of the approval letter issued by the PA Department of Health.
	Is this construction exempt from energy code requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If " <b>Yes</b> ," submit 1 copy of a letter indicating that the building or structure will use neither electricity nor fossil fuels, and thus is exempt per ASHRAE 90.1, §2.3(B).
	Is project in flood hazard area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If " <b>Yes</b> ," submit 1 copy of one of the flood hazard certifications mandated in section 1612.5 of the <i>International Building Code</i> .
	Are <i>International Building Code</i> (Chapter 17) special inspections or structural observations required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If " <b>Yes</b> ," submit 1 copy of the SPECIAL INSPECTIONS OBSERVATIONS STATEMENT.
	Will an alternative construction method or material be used on this project?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If " <b>Yes</b> ," submit a signed statement indicating that the proposed method or material meets the requirements of 34 PA Code §403.44.
	Is this application for "phased approval"?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>For Official Use Only</b>	Check #: _____ Amount: _____ Date: _____		

<p><b>Project Data</b></p>	<p>Number of stories above grade _____</p> <p>Does it have a basement?    <input type="checkbox"/> Yes    <input type="checkbox"/> No</p> <p>Total floor area (sq. ft.) _____</p> <p>Floor area <b>new</b> construction (sq. ft.) _____</p> <p>Floor area of <b>addition</b> (sq. ft.) _____</p> <p>Floor area <b>renovated</b> (sq. ft.) _____</p> <p>Estimated cost of construction    \$ _____</p> <p>Type(s) of construction per Chapter 6 of the <i>International Building Code</i> (check all that apply):</p> <p>          <input type="checkbox"/> IA    <input type="checkbox"/> IB    <input type="checkbox"/> IIA    <input type="checkbox"/> IIB    <input type="checkbox"/> IIIA    <input type="checkbox"/> IIIB    <input type="checkbox"/> IV    <input type="checkbox"/> VA    <input type="checkbox"/> VB</p> <p>Fire suppression:    <input type="checkbox"/> Full    <input type="checkbox"/> Partial    <input type="checkbox"/> None</p> <p>If application applies to an existing certified building, provide any prior file #, DI #, permit #, etc. associated with this project:</p> <p>File #: _____    Permit #: _____</p> <p>DI #: _____    Other (MA #/Fee #): _____</p>
<p><b>Building Code Data</b></p>	<p>Triennial ICC code version used for <b>Building</b> code compliance:  _____ 2009    _____ 2015</p> <p>If Alterations to existing certified building: (select applicable document used)  _____ IBC Chapter 34    _____ International Existing Building Code (IEBC)</p>
<p><b>Accessibility Code Data</b></p>	<p>Triennial ICC code version for <b>Accessibility</b> code compliance/IBC Chapter 11  _____ 2015    _____ 2018</p>
<p><b>Design Professional In Responsible Charge</b></p> <p>Seal <b>must</b> be in space to right of name &amp; address.</p>	<p>Name _____</p> <p>Address _____</p> <p>PA License # _____</p> <p>Email _____</p> <p>Phone _____</p> <p>Fax _____</p> <p style="text-align: right;"><b>SEAL</b></p>
<p><b>Owner Information</b></p>	<p>Owner Name _____</p> <p>Street Address _____</p> <p>City _____ State _____ Zip Code _____</p> <p>Phone _____</p>
<p><b>Deferred Submissions</b></p>	<p>If you intend to defer any of the plan submission below, please, check the appropriate box(es).</p> <p><input type="checkbox"/> Fire Alarm System    <input type="checkbox"/> Wood Roof Trusses (Certified)    <input type="checkbox"/> Sprinkler System</p>

Additional Notes:

**Applicant's Certification:**

Note: **THE BUILDING PERMIT AND THE CERTIFICATE OF OCCUPANCY FOR THIS BUILDING OR STRUCTURE WILL BE ISSUED TO AND IN THE NAME OF THE PERSON LISTED BELOW.**

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 South Penn Code Consultants.
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 and Reviewed with South Penn Code Consultants.
5. If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to South Penn Code Consultants.
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.

Applicant Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

## PLAN REVIEW CHECKLIST

**This checklist must accompany permit applications for all Commercial buildings**

**ALL INFORMATION MUST BE FILLED IN, CHECKED OR MARKED "NA"**

Project Name:	
Project Address:	
Owner/Agent:	Telephone:
Design professional or other person we can contact about info on this form and other project details (if same as Owner/Agent, just provide fax # and e-mail address):	Phone: _____ Fax: _____ Email: _____

**General Requirements:**

All drawings, shall be sealed, signed, and dated, by a design professional (licensed architect or engineer).

- Three (3) sets of drawings** are included in this application package (**mandatory**).
- Three (3) site plans** are included in this application package (**mandatory**).
- One (1) set of specifications** is included in this application package (**mandatory**).

**SITE PLANS:**

- Yes     N/A    a. Site plans shall be prepared to scale (not less than 1"=20'), with legend, north arrow, and **separate** vicinity (site location) map.
- Yes     N/A    b. Show the correct street address, parcel number and required municipal zoning (if there is local zoning ordinance) on the site plans.
- Yes     N/A    c. Show and identify all property lines and rights-of-way, with distance from property lines and adjacent buildings on site plans.
- Yes     N/A    d. Show all accessible parking spaces and signage per ICC/ANSI A117.1 and the *International Building Code* on site plan.
- Yes     N/A    e. Show accessible curb cuts, ramps and access ways to the building.
- Yes     N/A    f. Show all existing and proposed driveway entrances.
- Yes     N/A    g. Identify adjacent land uses and zoning.
- Yes     N/A    h. Show all easements, flood ways, and required buffers.
- Yes     N/A    i. Show existing and proposed utilities (with backflow preventers) to serve the site.
- Yes     N/A    j. Show existing and proposed finish grades.
- Yes     N/A    k. Show details, sections, and elevations needed for construction.
- Yes     N/A    l. Show all buffer and screening landscaping.
- Yes     N/A    m. Show all required parking and loading spaces and calculations.

**ARCHITECTURAL PLANS:**

- Yes     N/A    a. Show architectural floor plans of each floor. These pages must be at least 18" x 24" in size (but not more than 36" x 42"), drawn to a scale of not less than 1/8" = 1'. Indicate (or reproduce) the approved, tested hourly rating, number and location of all rated members and assemblies (walls, columns, beams, floor and ceiling, and ceiling and roof fire-rated design assemblies). Show all fire-rated walls (both existing and new) with their ratings, if not shown elsewhere. **Drawings submitted without required fire-rated walls shown will be rejected.**
- Yes     N/A    b. Show the square footage of each floor on the corresponding floor plans.
- Yes     N/A    c. Identify the names and uses of each room.
- Yes     N/A    d. Furnish door schedule(s), including size, type, rating (if any) and hardware.
- Yes     N/A    e. Provide all glazing schedules.
- Yes     N/A    f. Show elevations with dimensions defining overall building height, floor-to-floor heights or heights to ridge and eave as applicable to the type of building construction listed on the UCC application. (Note: Where an existing building is involved, photographs of all sides of the building may be submitted to show elevations. **These will be acceptable only if they show all elements necessary to determine compliance with the UCC.**)
- Yes     N/A    g. Provide basement percentage-below-grade calculations.
- Yes     N/A    h. Indicate roof slopes, drainage system and sized through wall scuppers, if applicable to the project.
- Yes     N/A    i. Show fixed seating for assembly occupancy to allow determination of occupancy posting required by *International Building Code*.
- Yes     N/A    j. Show wall sections with proposed material sizes, construction and fire-rated assemblies.
- Yes     N/A    k. Show proposed plumbing fixtures and privacy screens on the plans.

- Yes     N/A    l. If masonry construction is proposed, include the following information:  
 Type of brick ties and spacing of weep holes.  
 Placement of wall flashing and reinforcement.
- Yes     N/A    m. If appropriate for the proposed occupancy, plans should identify all hazardous material control areas, fire barriers and the required fire-resistance ratings for these barriers. All identified control areas shall list the name, class, quantity and method of storage of all hazardous materials processed, manufactured or used in a manufacturing process and contained within its fire barriers. Provide a Material Safety Data Sheet for each listed hazardous material. See sections 414 and 415 of the *International Building Code*
- Yes     N/A    n. Show the floor slab vapor barrier.
- Yes     N/A    o. Show foundation water-proofing, if applicable.
- Yes     N/A    p. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed the rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
- N/A    q. Show penthouse drawings.
- Yes     N/A    r. Provide on the drawings the calculations for the means of egress widths for the entire floor occupancy load and the existing capacity of all exits including all stairs, doors, corridors and ramped exits.
- Yes     N/A    s. Show required ventilation louvers and vent sizes.

**STRUCTURAL PLANS:**                     N/A

- Yes     N/A    a. Show foundation plans indicating the proposed slab elevations and type of foundation (i.e., mat foundation, caissons, spread footings, etc.).
- Yes     N/A    b. Provide preliminary soil analysis data done by a licensed engineer, if required.
- Yes     N/A    c. Indicate dimensions of foundations.
- Yes     N/A    d. Show type, size and location of piling and pile caps for pile foundation.
- Yes     N/A    e. Indicate grade beam sizes.
- Yes     N/A    f. Indicate a footing schedule defining footing sizes and the required reinforcing.
- Yes     N/A    g. Show the established footing depth below grade and method of frost protection allowed in the *International Building Code*.
- Yes     N/A    h. Indicate the thickness of the floor slab, size of reinforcing, slab elevations, and type and details of foundations.
- Yes     N/A    i. Indicate location, size and amount of reinforcing steel.
- Yes     N/A    j. Show foundation corner reinforcing bars and minimum overlapping (as applicable to project structure).
- Yes     N/A    k. Provide strength of concrete according to designed soil reports.
- Yes     N/A    l. Show beams, joists, girders, rafters, and/or truss layouts and details of connections, structural steel stud gage, gage size, and connections.
- Yes     N/A    m. Indicate the sizes and species of all wood members and their respective design strength.
- Yes     N/A    n. Show all columns, girders, joists, purlins, beams and base plates; for wood construction show all headers.
- Yes     N/A    o. Provide a complete lintel schedule.
- Yes     N/A    p. Indicate the type of anchoring for steel bearing directly on masonry.

- Yes     N/A    q. Indicate design dead and live, wind, snow, seismic loads for floor areas, roofs, balconies, porches, breezeways, corridors, stairs, mezzanines and platforms. Show concentrated loads, i.e. file rooms, machinery and forklift areas, if greater than those shown on the Code Summary Sheet. Identify shear walls, bracing, strapping fastening, reinforcement and any special anchoring required.
- Yes     N/A    r. Where applicable, indicate on roof framing plan where concentrated loads (mechanical equipment, cranes, etc.) will be placed.
- Yes     N/A    s. Indicate on foundation and framing plans the location and lateral load resisting system. (Show walls, braced frames, moment connections, etc.)

**FIRE PROTECTION PLANS:**                       N/A

- Yes     N/A    a. Complete a sprinkler design data sheet and include it on the first plan of the sprinkler drawings.
- Yes     N/A    b. Show floor plans for each floor with sprinkler piping layout, pipe sizes, pipe hanger details, piping materials, doors, walls and room identities. Often, these shop drawings are not available at the time of initial plan submission. If this is the case, write in "NA," but note the following:
- These shop drawings must be submitted for department review and approval **at least two weeks before the projected installation date.**
  - Failure to obtain approval of these drawings before installation could result not only in delay of the final inspection and issuance of an occupancy permit, but also in removal and reconstruction of installations which fail to meet UCC requirements.
- Yes     N/A    c. Show ceiling plans with sprinkler head(s) layout, walls, soffits, openings, doors, dimensions and room identities.
- Yes     N/A    d. Verify system design by providing hydraulic calculations along with the following:
- Recent water flow test
  - Percent safety margin
  - Type of backflow-preventer or reduced pressure zone showing equivalent foot loss
  - Fire pump summary
- Yes     N/A    e. Note the type of sprinkler system used (e.g., 13, 13D, or 13R)
- Yes     N/A    f. For residential occupancies such as apartments and condominiums, show sprinkler head locations at breezeways, if applicable.
- Yes     N/A    g. Indicate the certified testing laboratory agency (e.g., U.L.), their test number and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere.
- Yes     N/A    h. All penetrations of fire-rated construction must be per manufacturer's details. Details shall meet or exceed ratings of construction being penetrated. The penetration details shall be exactly as tested by a certified testing laboratory or agency and shall include their system numbers. All new penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
- Yes     N/A    i. Provide a fire alarm riser showing connection to a UL-approved central station. Show tamper switches on both OS and Y valves of backflow prevention device, unless shown elsewhere.
- Yes     N/A    j. Indicate commodity class (per section 2303 of the *International Fire Code*) and height of any storage.
- Yes     N/A    k. Provide Material Safety Data Sheets for any hazardous materials (also specified under "**ARCHITECTURAL PLANS**").

- Yes     N/A    i. Where special temperature-rated or high-temperature sprinklers are required, show sprinkler type(s) per area, office size, cut sheets with K-factor, water requirements, spray pattern, coverage and other pertinent data.

**SYSTEM CALCULATIONS (FIRE PROTECTION):**                     N/A

- Yes     N/A    a. Flow and pressure at each flowing sprinkler head.  
 Yes     N/A    b. Flow diagram for a grid system.

**PLUMBING PLANS:**                     N/A

- Yes     N/A    a. Show a site utilities plan, if not provided with the civil drawings.  
 Show the domestic water, fire, and irrigation services.  
 Show the location of water meters, backflow protection type and location.  
 Show the sanitary sewer service from building to public sewer or approved private sewage disposal system.
- Yes     N/A    b. Show interceptors as applicable to project and size by flow rate. (i.e., grease, oil, lint, acid, sand).
- Yes     N/A    c. Provide plumbing plan layouts for each floor. These should show the water distribution and drain-waste-vent piping, and all details, notes, legends, and schedules necessary to define the system being installed.
- Yes     N/A    d. Show the location of all major components required for a complete system.
- Yes     N/A    e. Provide fixture and equipment schedule showing fixture number, detailed description, hot water, cold water, waste and vent connection sizes and other pertinent data.
- Yes     N/A    f. Identify all fixtures on floor plans and in riser diagrams with the plumbing fixture schedule number.
- Yes     N/A    g. Supply and Waste/Vent piping shall be shown on the floor plans. All pipe sizes shall be clearly shown. In congested areas (e.g., restaurants, grocery stores, etc.), isometrics are required.
- Yes     N/A    h. On buildings two stories and above, provide isometric diagrams and/or schematic riser diagrams for Supply and Waste/Vent piping and identify the risers by number (e.g., R1, R2, etc.). Show where all riser base terminations connect to the building drain, along with all interconnected piping on each floor plan. All pipe sizes shall be clearly defined.
- Yes     N/A    i. Show the water, sanitary drain-waste-vent piping and storm leaders/drains. Indicate sizes and materials for above/below grade.
- Yes     N/A    j. Show slope of horizontal sanitary and storm drains that equal or exceed 3" diameter, if less than 1/8" per foot.
- Yes     N/A    k. Indicate roof drains and emergency roof drains/scuppers with the areas they impact. Note that "emergency" = "secondary" = "overflow"; see following roof drainage examples:
- Roof Drain - 6" RD (16880 SF)
  - Emergency Roof Drain - 6" ERD (8180 SF)
  - Parapet Wall Scupper - 8" x 5" WS (4000 SF)
  - Emergency Scupper - 8" x 7" ES (4200 SF)
- Yes     N/A    l. Show toilet room layouts with minimum of 1/4" = 1 foot scale.
- Yes     N/A    m. Show drinking fountain locations.
- Yes     N/A    n. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers.



- Yes     N/A    o. Room names and numbers for each floor should be on a floor plan for each level.
- Yes     N/A    p. Provide minimum facilities calculations.
- Yes     N/A    q. Column line notations, if provided on the architectural/structural plans, shall be indicated on the plumbing plans.

**MECHANICAL PLANS:**                     N/A

- Yes     N/A    a. Show all required wall louvers, penetrations and fans.
- Yes     N/A    b. Indicate roof-mounted equipment locations.
- Yes     N/A    c. Show all mechanical equipment, piping, ductwork (above/below slab) on the mechanical floor and/or roof plan.
- Yes     N/A    d. Provide mechanical plans for each floor and the roof. These shall show the ductwork layouts, schedules, notes, legends, piping schematics, and details necessary to define the system being installed.
- Yes     N/A    e. Indicate air distribution devices and show cfm for all supply, return and exhaust devices.
- Yes     N/A    f. Indicate the location of all equipment components required for a complete system.
- Yes     N/A    g. Show the smoke ventilation of atriums and pressurization of high-rise stairwells.
- Yes     N/A    h. Show condensation drains, primary and secondary, from the unit to the point of discharge.
- Yes     N/A    i. Indicate toilet exhaust requirements.
- Yes     N/A    j. Show mechanical room layouts at sufficient scale for dimensions and details to be ascertained.
- Yes     N/A    k. Show the size of duct runs.
- Yes     N/A    l. Indicate controls for fan shutdown: emergency manual and automatic smoke detection
- Yes     N/A    m. Show the location of all UL 555-certified fire dampers, ceiling radiation dampers, smoke dampers, and fire doors.
- Yes     N/A    n. Show all fire-rated walls (both existing and new) with their ratings on the mechanical plans.
- Yes     N/A    o. All penetrations of fire-rated construction must be per manufacturer's details.
- Yes     N/A    p. Room names and numbers for each floor should be on a floor plan for each level.
- Yes     N/A    q. Provide outside air ventilation rate per the *International Mechanical Code*.
- Yes     N/A    r. Column line notations, if provided on the architectural/structural plans, shall be identified on the mechanical plans.
- Yes     N/A    s. Provide gas piping layout on the floor plan for each floor. If it is a multi-story building, all gas piping shall be shown per floor. Include pipe sizes, water column, and type of material. Provide a schedule of connected equipment, total BTUH demand, total equivalent length, and most remote gas appliance.

**ELECTRICAL PLANS:**                     N/A

- Yes     N/A    a. Provide panel schedules with circuit and feeder loading, overcurrent protection, and NEC load summaries for all new and/or affected panels and services (loading has to be evaluated by highest phase); include fault current data, short circuit ratings and fault current protection coordination.
- Yes     N/A    b. Provide a single line riser diagram showing all new and/or affected services, feeders, wire sizes and insulation types, and conduit sizes and types.
- Yes     N/A    c. Indicate number of services and their physical locations; clearly indicate mains and characteristics.

- Yes     N/A    d. Indicate the grounding electrode conductor size with new and/or affected services and transformers; where necessary provide details or notes on methods.
- Yes     N/A    e. Show physical locations of all new and/or affected panels and switchgear (indicate front).
- Yes     N/A    f. Indicate receptacle plans with circuitry.
- Yes     N/A    g. Indicate lighting plans with circuitry.
- Yes     N/A    h. Show electrical plans for each affected floor, including the roof.
- Yes     N/A    i. Show wiring method(s), conduit sizes and types, termination temperature (60, 75, 90) requirements, conductor sizes and insulation types.
- Yes     N/A    j. Indicate the design and/or operation for any of the following applicable life safety systems: emergency generators, smoke evacuation, shaft pressurization and relief, smoke detection, egress and emergency lighting, and fire alarms.
- Yes     N/A    k. Indicate how special needs such as classified (hazardous), corrosive and patient care are treated. Provide detailed plan of classified areas, the classifications and how complied with (i. e. hangers, waste treatment and collection, flammable dusts, gases or liquids, spray booths, vehicle servicing and parking, etc.).
- Yes     N/A    l. Provide all HVAC nameplate data, including MCA and MOCP. List all other appliance and/or equipment (other than those which will be connected to a general use receptacle) with nameplate data (i.e., voltage, phasing, HP, KVA, FLA, RLA, etc.).
- Yes     N/A    m. Indicate all motor horse power ratings, if not supplied elsewhere.
- Yes     N/A    n. Indicate the certified testing laboratory or agency (e.g., UL), their test # and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling, and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere.
- Yes     N/A    o. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed ratings of construction being penetrated. Penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
- Yes     N/A    p. Provide all applicable *International Energy Conservation Code* compliance data on the Building Code Summary sheet or on the electrical plans.
- Yes     N/A    q. All submittals should include a listing and labeling statement. (All electrical materials, devices, appliances and equipment shall be labeled and listed by a certified testing laboratory or agency.)

**Uniform Construction Code  
 SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT**

This statement must accompany permit applications for all construction for which special inspections and observations are required in Chapter 17 of the <b>International Building Code 2015 (IBC)</b>	
Project name:	
Project address:	
Owner:	Telephone:

This is to certify that all the inspections and observations that I have checked on pages 2-3 **and** on page 4 of this statement are required for the project named above and will be performed by the designated individuals or firms. By signing this statement, I also acknowledge that:

- these inspections and observations must be performed by competent individuals in accordance with the requirements of the IBC Chapter 17 (as applicable) and that the construction work must comply with the department-approved plans and specifications and all applicable provisions of the uniform construction code;
- records of all required special inspections and testing observations (including any discrepancies and methods of correction of these discrepancies) will be retained and made available to department representatives, upon request; and,
- the final report section of this statement must be signed by me and a copy of this statement submitted to the South Penn Code Consultants Inspector, at the time that the final inspection is performed and before a certificate of occupancy is issued.

\_\_\_\_\_  
 Name of Design Professional in Responsible Charge

Affix Seal Here

\_\_\_\_\_  
 Signature of Design Professional in Responsible Charge

\_\_\_\_\_  
 PA License Number

\_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date signed (Month/day/year)

<b>CHECK EACH THAT APPLIES</b>	<b>TYPE OF SPECIAL INSPECTION OR OBSERVATION</b>	<b>NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION</b>	<b>CREDENTIALS</b> (Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	<b>Inspection of Steel Construction Section 1705.2</b>		
<input type="checkbox"/>	<b>Inspection of Concrete Construction Section 1705.3</b>		
<input type="checkbox"/>	<b>Inspection of Masonry Construction Section 1705.4</b>		
<input type="checkbox"/>	<b>Inspection of Wood Construction Section 1705.5</b>		
<input type="checkbox"/>	<b>Inspection of Soil Conditions Section 1705.6</b>		
<input type="checkbox"/>	<b>Inspection of Driven Deep Foundations Section 1705.7</b>		
<input type="checkbox"/>	<b>Inspection of Cast-in-Place Deep Foundations Section 1705.8</b>		
<input type="checkbox"/>	<b>Inspection of Helical Pile Foundations Section 1705.9</b>		

THAT APPLIES	INSPECTION OR OBSERVATION	FIRM PERFORMING INSPECTION OR OBSERVATION	please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	<b>Inspection of Fabricated Items Section 1705.10</b>		
<input type="checkbox"/>	<b>Inspection for Wind Resistance Section 1704.6; 1705.11</b>		
<input type="checkbox"/>	<b>Inspection and Testing for Seismic Resistance Section 1704.6;1705.12;1705.13</b>		
<input type="checkbox"/>	<b>Inspection of Sprayed Fire-Resistant Materials Section 1705.14</b>		
<input type="checkbox"/>	<b>Inspection of Mastic and Intumescent Fire-Resistant Coatings Section 1705.15</b>		
<input type="checkbox"/>	<b>Inspection of Exterior Insulation and Finish System (EIFS) Section 1705.16</b>		
<input type="checkbox"/>	<b>Inspection of Fire-Resistant Penetrations and Joints Section 1705.17</b>		
<input type="checkbox"/>	<b>Testing for Smoke Control Section 1705.18</b>		

<b>FINAL REPORT</b>	<p><b>Required special inspections or observations:</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Inspection of Steel Construction  <input type="checkbox"/> Inspection of Concrete Construction  <input type="checkbox"/> Inspection of Masonry Construction  <input type="checkbox"/> Inspection of Wood Construction  <input type="checkbox"/> Inspection of Soil Conditions  <input type="checkbox"/> Inspection of Driven Deep Foundations  <input type="checkbox"/> Inspection of Cast-in-Place Deep Foundations  <input type="checkbox"/> Inspection of Helical Pile Foundations </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Inspection of Fabricated Items  <input type="checkbox"/> Inspection for Wind Resistance  <input type="checkbox"/> Inspection and Testing for Seismic Resistance  <input type="checkbox"/> Inspection of Sprayed Fire-Resistant Materials  <input type="checkbox"/> Inspection of Mastic and Intumescent Fire-Resistant Coatings  <input type="checkbox"/> Inspection of Exterior Insulation and Finish System (EIFS)  <input type="checkbox"/> Inspection of Fire-Resistant Penetrations and Joints  <input type="checkbox"/> Testing for Smoke Control </td> </tr> </table> <p>I certify that I have reviewed the report on each of the inspections or observations checked above. These reports indicate that the covered work is in compliance with the department-approved plans and specifications and all applicable provisions of the uniform construction code.</p> <p style="text-align: right;">Signature of Design Professional in Responsible Charge:</p> <p style="text-align: center;">_____</p> <p style="text-align: right;">Date signed:</p> <p style="text-align: center;">_____/_____/_____ (Day/month/year)</p>	<input type="checkbox"/> Inspection of Steel Construction <input type="checkbox"/> Inspection of Concrete Construction <input type="checkbox"/> Inspection of Masonry Construction <input type="checkbox"/> Inspection of Wood Construction <input type="checkbox"/> Inspection of Soil Conditions <input type="checkbox"/> Inspection of Driven Deep Foundations <input type="checkbox"/> Inspection of Cast-in-Place Deep Foundations <input type="checkbox"/> Inspection of Helical Pile Foundations	<input type="checkbox"/> Inspection of Fabricated Items <input type="checkbox"/> Inspection for Wind Resistance <input type="checkbox"/> Inspection and Testing for Seismic Resistance <input type="checkbox"/> Inspection of Sprayed Fire-Resistant Materials <input type="checkbox"/> Inspection of Mastic and Intumescent Fire-Resistant Coatings <input type="checkbox"/> Inspection of Exterior Insulation and Finish System (EIFS) <input type="checkbox"/> Inspection of Fire-Resistant Penetrations and Joints <input type="checkbox"/> Testing for Smoke Control
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KEY for use in **CREDENTIALS** column:  
(on pages 2, 3 and 4)

<b>ACI</b>	American concrete institute certified concrete field testing technician
<b>AWS</b>	American welding society certified welding inspector
<b>ASNT</b>	American society of non-destructive testing
<b>AWCI</b>	Association of wall and ceiling industries
<b>MCA</b>	Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification
<b>PA</b>	Professional architect (currently licensed)
<b>PE</b>	Professional engineer (currently licensed)
<b>OTHER</b>	Specialized training coursework or other basis for competency deemed acceptable

**WORKERS' COMPENSATION INFORMATION FORM**

**THIS FORM REQUIRES A NOTARY SEAL**

**AFFIDAVIT OF EXEMPTION**

The undersigned affirm that he/she is not required to provide workers compensations insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

\_\_\_ Property owner performing own work. If property owner does hire a contractor to perform any work pursuant to building permit, contractor must provide proof of workers' compensation insurance to the municipality. Homeowner assumes liability for contractor compliance with these requirements.

\_\_\_ Contractor has 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 municipality.

\_\_\_ Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (attach copies of religious exemption letter for all employees).

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Signature of Applicant

County of \_\_\_\_\_

Municipality of \_\_\_\_\_

Subscribed, sworn to and acknowledged before me by the above

\_\_\_\_\_ this \_\_\_\_\_ Day of \_\_\_\_\_ 20\_\_\_\_\_

SEAL

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Notary Public

**MUST BE NOTARIZED**