MOSHANNON VALLEY COUNCIL OF GOVERNMENTS

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SUITE 7

CLEARFIELD, PA 16830

8 1 4 - 7 6 5 - 3 0 8 0

1. ITEMS TO SUBMIT:

- A. COMPLETED AND SIGNED APPLICATION
- B. SIGNED PRIOR MUNICIPAL APPROVAL PAGE
- C. TWO (2) SETS OF PLANS
- D. ANY OTHER ITEM(S) LISTED ON THE SUBMITTAL HANDOUT CHECKLIST
- 2. GET PRIOR APPROVAL FORM SIGNED BY THE MUNICIPALITY IN WHICH THE WORK WILL BE DONE.
- 3. PLEASE PROVIDE ACCURATE MAILING ADDRESS INFORMATION ON THE APPLICATION FOR THE MAILING OF YOUR CERTIFICATE OF OCCUPANCY.
- 4. WHEN ALL NECESSARY PAPERWORK HAS BEEN COMPLETED, RETURN IT TO THE MVCOG OFFICE OR TO YOUR MUNICIPAL OFFICE. AFTER YOUR APPLICATION HAS BEEN REVIEWED, YOU WILL BE CONTACTED WITH THE AMOUNT OF THE PERMIT FEE. PERMIT MUST BE PAID FOR IN FULL BEFORE ISSUANCE.
- 5. ONCE PERMIT IS ISSUED, IT IS <u>YOUR</u> RESPONSIBILITY TO SCHEDULE ALL NECESSARY INSPECTIONS.

*FOR **RESIDENTIAL** PROJECTS, CALL **JACK CARNS** AT **814-591-0186**.

*FOR **COMMERCIAL** PROJECTS, CALL **BRIAN WRUBLE** AT **814-590-2933**.

FAILURE TO CALL FOR A FINAL INSPECTION COULD RESULT IN ADDITIONAL FEES AND/OR PENALTIES.

- 6. IF ANY ASSISTANCE IS NEEDED, CONTACT THE MVCOG OFFICE.
 - A. PHONE (814) 765-3080
 - B. FAX (814) 765-3082
 - C. moshannonvalleycog@gmail.com

(OFFICE HOURS ARE MONDAY AND THURSDAY FROM 9 AM TO 3 PM)

PENNSAFE BUILDING INSPECTION SERVICES LLC - PERMIT APPLICATION

175 Beaver Drive, P.O. Box 486 - DuBois, PA. 15801

Fax: 814-375-1117 Phone: 814-375-1111

Permit No.			
LOCATION OF PROPOSED WORK OR IMPROVEM	ENT		
Municipality:			
Tax Parcel #			
Site Address:			
Lot#Subdivision/Land Development:	Phase:Section:		
Owner:	Phone#Fax#		
Mailing Address:	Email:		
Principal			
•	Phone#Fax#		
Mailing Address:			
Architect:	Phone# Fax#		
Mailing Address:	Email:		
TYPE OF WORK OR IMPROVEMENT (Circle all tha	at apply)		
New Building Addition Alteration Repa			
Change of Use Plumbing Electrical			
Describe the Proposed work:			
ESTIMATED COST OF CONSTRUCTION (Reasonable	e fair market value)		
DESCRIPTION OF BUILDING USE (Check one then	complete applicable info)		
RESIDENTIAL	NON-RESIDENTIAL (Commercial)		
Single Family Dwelling	Specific Use		
Duplex	Use Group:Construction Type:		
Townhouse	Change of Use (indicate former and proposed):		
Total Sq. ft. of finished living space			
	Maximum Occupant Load:		
	Maxim1um Live Load:		

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Sprinkler system to be installed: (Check one) Ye	es r	No		
BUILDING DIMENSIONS				
Existing Building Area:	sq. ft.	Number of Stories:		
Proposed Building Area:	_sq. ft.	Height Above Grade:	ft.	
Total Building Area:	_ sq. ft.	Area of Largest Floor:	sq. ft.	
FLOODPLAIN INFORMATION				
Is the site located within an identified flo	od plan a	rea? (Check one) Yes	No	
Note: All proposed development shall be	e in accor	dance with the requirement	s of the National	
Flood Insurance Program and the Pennsy	/lvania Flo	ood Plain Management Act.		
HISTORIC DISTRICT INFORMATION				
Is the site located within a Historical Dist	rict? (Ch	eck one) Yes No	-	
Note: If yes, you must provide proper Hi	istorical D	istrict certification per the U	CC Law.	
The applicant certifies that all information on th	is applica	tion is correct and the work	will be completed in	
accordance with the "approved" construction do	= =		·	
 additional approved building code requirements			•	
assumes the responsibility of locating all proper	-			
Issuance of a permit and approval of construction	n docum	ents shall not be construed a	as authority to violate,	
cancel or set aside any provisions of the codes o	r ordinan	ces of the Municipality or an	y other governing body.	
The applicant hereby certifies he/she understan	ds all app	licable codes, ordinances an	d regulations.	
Application for a permit shall be made by the ov	vner or le	essee of the building or struc	cture, or authorized agent	
of either, or by the authorized registered Desig				
certify that the Code Administrator or the Cod	le Admin	istrator's authorized represe	entative shall have the	
authority to enter areas covered by such permi				
applicable codes to such permit.				
Signature of Owner or Authorized Agent		Print Name of Owner or Author	ized Agent	
Address:	ess: Date:			
Directions to Worksite:				
OFFICE USE ONLY below				
Permit Fee: \$	Plan S	Submittal Checklist Attached	: yesno	
	Plan I	Review Approval Date:		

MUNICIPAL PRIOR APPROVAL CHECKLIST					
Name of Municipality					
Name of Applicant					
Parcel#	arcel# Lot#				
This Section below to be comple	ted by the Authorized M	lunicip	al Representative		
CHECKLIST ITEMS			·		
Is the project site located in a Flood Area? (Check one) yes no					
(Circle one)	Residential Project	or	Commercial Project		
Description of Work:					
Zoning or Land Use Permit	Approved		Not applicable		
Stormwater Management	Approved		Not applicable		
Street cut/ Driveway	Approved		Not applicable		
Sewage/Onlot Permit	Approved		Not applicable		
Water Permit	Approved		Not applicable		
PennDot Highway Occupancy	Approved		Not applicable		
Floodplain Permit	Approved		Not applicable		
Other	Approved		Not applicable		
I certify that all required Municipathereby is granted to issue the re-		l Regul	ations have been met and approval		
Authorized Municipal Representa	itive signature:				
Date:					

NOTE THAT THIS PERMIT APPLICATION PACKAGE MUST BE COMPLETED AND THEN SUBMITTED WITH THE PROJECT CONSTRUCTION PLANS AND THE CORRESPONDING SUBMITTAL CHECKLIST

PENNSAFE BUILDING INSPECTION SERVICES LLC

PLAN SUBMITTAL HANDOUT for COMMERCIAL RENOVATIONS, ALTERATIONS, CHANGE OF OCCUPANCY TO EXISTING BUILDINGS OR SMALL ADDITIONS

The Project Submittal package is required to include all information on this handout. Check each applicable item. If not applicable, then mark item n/a. This form must be submitted with attached project drawings.

Permit Application Municipal Prior Approval
Two full sets of Building Plans drawn to scale Existing Certificate of Occupancy (if available)
The following items are required to be included on the Building Plans
(Check every item that will be included in the project or marked n/a as not applicable)
Provide site plan.
Designate design code used.
Drawings must include all portions of the building affected by the construction project.
Provide code compliance path (ie: IBC Chapter 34 or International Existing Building Code).
Designate level of work as per code.
All floor plans including basement (both existing and newly proposed must be included).
Provide overview layout and detail of all structural elements.
Dimensions of all rooms and areas of building/structure.
Designate occupant load for each room and total for entire building.
All exterior elevations of building (existing buildings may substitute photographs of all sides)
Provide typical wall-section.
Designate type of construction and use group for all portions of building on the plan.
Designate all fire walls and separations.
Stairways, stair towers, ramps, fire escapes, etc.
Provide door schedule, include fire door ratings.
Emergency lighting systems, fire alarm systems and fire extinguishing equipment.
Indicate building means of egress, exit arrangement and sizes, corridors, doors, stairs, etc.
For all projects that contain plumbing, electric, mechanical or fire system installation or
alteration, a detail and scope of work for each discipline must be provided.
Exit signs and means of egress lighting.
Include <u>all</u> Handicapped accessibility provisions and details.
Provide energy code information and compliance path (for example: Comcheck)
If project is "Change of Use or Occupancy", indicate present use and new proposed use.
Drawings must be a minimum size of 15"x24" and drawn to a scale not less than 1/8" per ft.
List the plan designer with all contact information. Include phone, fax and email.