

MVCOG

MOSHANNON VALLEY COUNCIL OF GOVERNMENTS
501 E. MARKET STREET
SUITE 7
CLEARFIELD, PA 16830
814-765-3080

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 YOUR 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

Phone: 814-375-1111

Fax: 814-375-1117

Permit No. _____

LOCATION OF PROPOSED WORK OR IMPROVEMENT

Municipality: _____

Tax Parcel # _____

Site Address: _____

Lot# _____ Subdivision/Land Development: _____ Phase: _____ Section: _____

Owner: _____ Phone# _____ Fax# _____

Mailing Address: _____ Email: _____

Principal

Contractor: _____ Phone# _____ Fax# _____

Mailing Address: _____

Architect: _____ Phone# _____ Fax# _____

Mailing Address: _____ Email: _____

TYPE OF WORK OR IMPROVEMENT (Circle all that apply)

New Building Addition Alteration Repair Demolition Relocation
Change of Use Plumbing Electrical Mechanical Other _____

Describe the Proposed work: _____

ESTIMATED COST OF CONSTRUCTION (Reasonable fair market value) _____

DESCRIPTION OF BUILDING USE (Check one then complete applicable info)

RESIDENTIAL

Single Family Dwelling
Duplex
Townhouse
Total Sq. ft. of finished living space _____

NON-RESIDENTIAL (Commercial)

Specific Use _____
Use Group: _____ Construction Type: _____
Change of Use (indicate former and proposed): _____
Maximum Occupant Load: _____
Maximum Live Load: _____

Sprinkler system to be installed: (Check one) Yes _____ 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 flood plan area? (Check one) Yes _____ No _____

Note: All proposed development shall be in accordance with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act.

HISTORIC DISTRICT INFORMATION

Is the site located within a Historical District? (Check one) Yes _____ No _____

Note: If yes, you must provide proper Historical District certification per the UCC Law.

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 – Uniform Construction Code and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, right of ways, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant hereby certifies he/she understands all applicable codes, ordinances and regulations.

Application for a permit shall be made by the **owner or lessee of the building or structure, or authorized agent of either, or by the authorized registered Design Professional** employed in connection with the proposed work.

I certify that the Code Administrator or the Code Administrator’s authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the applicable codes to such permit.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Address: _____

Date: _____

Directions to Worksite: _____

OFFICE USE ONLY below

Permit Fee: \$ _____

Plan Submittal Checklist Attached: yes _____ no _____

Plan Review Approval Date: _____

MUNICIPAL PRIOR APPROVAL CHECKLIST

Name of Municipality_____

Name of Applicant_____

Parcel#_____ Lot#_____

This Section below to be completed by the Authorized Municipal 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 Municipal Codes, Ordinances and Regulations have been met and approval thereby is granted to issue the requested Permit.

Authorized Municipal Representative 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
RESIDENTIAL STICK BUILT HOUSE SUBMITTAL HANDOUT

Every item below must be checked as completed (if applicable), or marked n/a (if not applicable), for your project. This form must be completed in its entirety then returned with attached drawings.

- Permit Application
- Municipal Prior Approval Form
- Two full sets of plans. All dimensions must be indicated and drawn to scale.

****The following items are required to be included on the building plans****

- Site plan indicating all setbacks
- Exterior elevation of all sides
- Floorplan with overview of each floor level, with all rooms labeled and all sizes indicated.
- Complete cross-section view of structure (provided with form)
- Size and depth of footings. Include all pads and columns.
- Foundation details: indicate type such as masonry cinder block, ICF or superior wall,
- Type of sillplates to be used and fastening method.
- Size, location and type of support columns.
- Structural support beams – show sizes and how they are supported.
- Species and grade of all framing lumber.
- Floorjoists – type, size and spacing.
- Indicate type, size and thickness of floor sheathing.
- Interior and exterior wall stud sizes, grade and spacing.
- Provide header schedule showing spans and sizes.
- Interior wall finish.
- Exterior wall covering.
- Provide window schedule: including manufacturer, locations with corresponding numbers.
- Roof framing: denote trusses or rafters. Indicate spans, sizes and spacing.
- Roof sheathing: type and thickness
- Roof covering and ventilation method.
- Indicate Attic access size and locations.
- Indicate basement means of egress method.
- Provide porch and deck drawings.
- Indicate concrete floor material and thickness.
- If garage is attached to house, indicate method of fire separation include doors.
- Submit heat-loss/gain calculations. Indicate type of heating system and equipment location.
- All electrical work to conform to UCC adopted version of National Electric Code (NEC)

- Provide stairway details: Minimum width is 3'; Maximum stair rise is 8-1/4"; Minimum tread depth is 9" with 3/4" to 1-1/4" nosing; Minimum headroom is 6'8".
- Provide guardrail detail: Required for porches, balconies, open sides of stairs, or raised floor surfaces greater than 30" above floor or grade below; Minimum 36" above finished floor at horizontal locations; Minimum 34" above the leading edge of nosing measured vertically at stairs; Opening limitations = < 4" and < 6" at triangle formed by the rise and run of stairs and bottom of guardrail.
- Smoke detectors: show locations (one on each floor, one in each sleeping room and in the vicinity of each sleeping room); Interconnected and hardwired with battery back-up provided.
- Carbon monoxide detectors: show type and locations.
- Submit Energy Code Compliance Path. Provide approval certificate at electric service panel.
- Chimneys and fireplaces: indicate type, location and footing details.
- Basement: (Check one) Finished Unfinished

If Finished – must provide locations of finished areas – total square footage to be finished is _____sq. ft.

If Unfinished – notate on plan.

****Always remember you are required to contact "PA One Call" at 800-242-1776 before you dig****

****THIS COMPLETED FORM IS REQUIRED TO BE SUBMITTED WITH THE PROJECT PLANS****

"BUILDING INSPECTIONS FOR SAFER COMMUNITIES"

PENNSAFE BUILDING INSPECTION SERVICES LLC

Deck and Roof Cross Section Submittal

Roof Size: Width: _____ Length: _____

Roof Type: Gable: _____ Hip: _____ Shed: _____

Roof Pitch: _____

(check one) Trusses: _____ Rafters: _____

Spacing of Trusses or Rafters: _____

Rafter Size and Span: _____

Ridge Beam: Size: _____ Span: _____

Roof Sheathing: _____

Roof Covering: _____

Roof Header Beam: Size: _____ Span: _____

Deck Size: Width: _____ Length: _____

Footer Size: Width: _____ Length: _____

Carrier Beam: Size: _____ Span: _____

Type of Floor Joist: _____

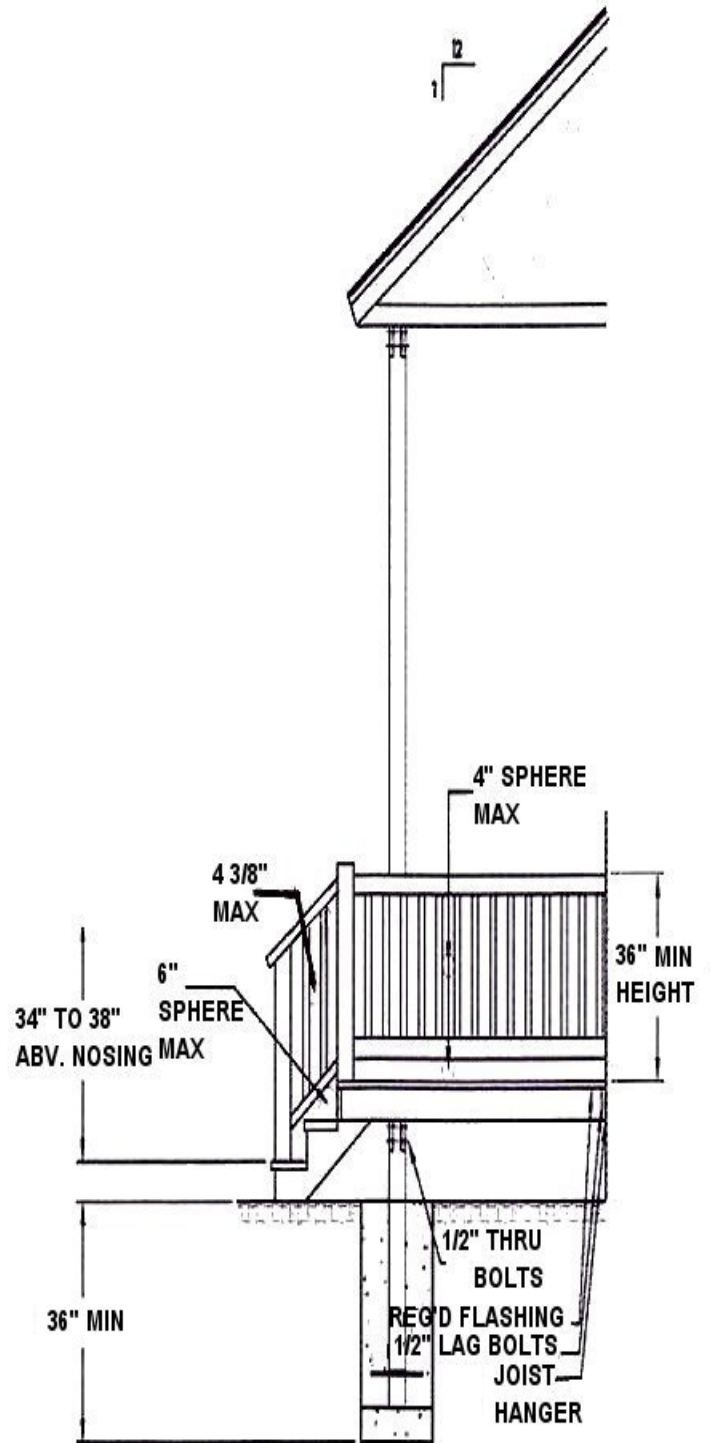
Floor Joist: Size: _____ Span: _____

Decking Material: _____

Number of Steps: _____

Riser Height: _____

Tread Depth: _____



PENNSAFE BUILDING INSPECTION SERVICES LLC
RESIDENTIAL DECK AND PORCH ROOF PROJECT SUBMITTAL HANDOUT

Every item below should be checked as completed (if applicable), or marked n/a (if not applicable), for your project. This form must be completed in its entirety then returned with attached drawings.

- Application
- Municipal Prior Approval Form
- Site Plan showing setbacks
- Two sets of plans (All dimensions must be indicated, be in ink and drawn to scale)

****The following items are required to be included on the Building Plan Drawings:****

- Floorplan drawing looking down at deck/porch.
- Provide locations of all posts and beam locations and indicate spans.
- Top, front and side views of deck.
- Complete cross section (provided)
- Size, thickness and depth (below grade) of footings.
- Size, type and spacing of support columns.
- Type of wood to be used. (Specify species and grade)
- Size of floor joist, span and distance between joists.
- Size, type and span of all girder beams.
- Height of wood joist, girder and floor above finish grade.
- Type and thickness of floor sheathing. (Decking)
- Stair riser height and depth/width of tread.
- Handrail height and ballister spacing.
- Guardrail height and ballister spacing.
- Ledger fastening method, i.e. - bolt spacing.
- Deck flashing method
- Roof construction details (see cross section)

****THIS COMPLETED FORM MUST BE SUBMITTED WITH PROJECT PLANS****

PENNSAFE BUILDING INSPECTION SERVICES LLC

House and Addition Cross Section Submittal

Roof Info:

Type: Check one: Gable: _____ Shed: _____ Hip: _____ Combo: _____

Slope of Roof: _____

Roof Sheathing: _____

Roof Covering: _____

Roof Rafters: Yes: _____ No: _____

Roof Rafters Span: _____

Rafter Size and Spacing: _____

Trusses: Yes: _____ No: _____

Truss Spacing: _____

Ridge Vent: Yes: _____ No: _____

Type of Insulation: _____

R-Value: _____

Floor System Info:

Type of Floor Joist: _____

Floor Joist Span: _____

Floor Joist Spacing: _____

Floor Sheathing: _____

Type of Support Beam: _____

Support Beam Span: _____

Exterior Walls Info:

Type of Walls: _____

Spacing of Studs: _____

Wall Sheathing: _____

Type of Insulation: _____ R-Value: _____

Header Spans: _____

Height of Walls: _____

Type of Finish: _____

Type of Air Barriers: _____

Foundation Info

Type of Foundation: Block: _____ ICF: _____ Concrete: _____ Other: _____

Type of Footer: _____

Footer Dimensions: _____ Thickness and Depth

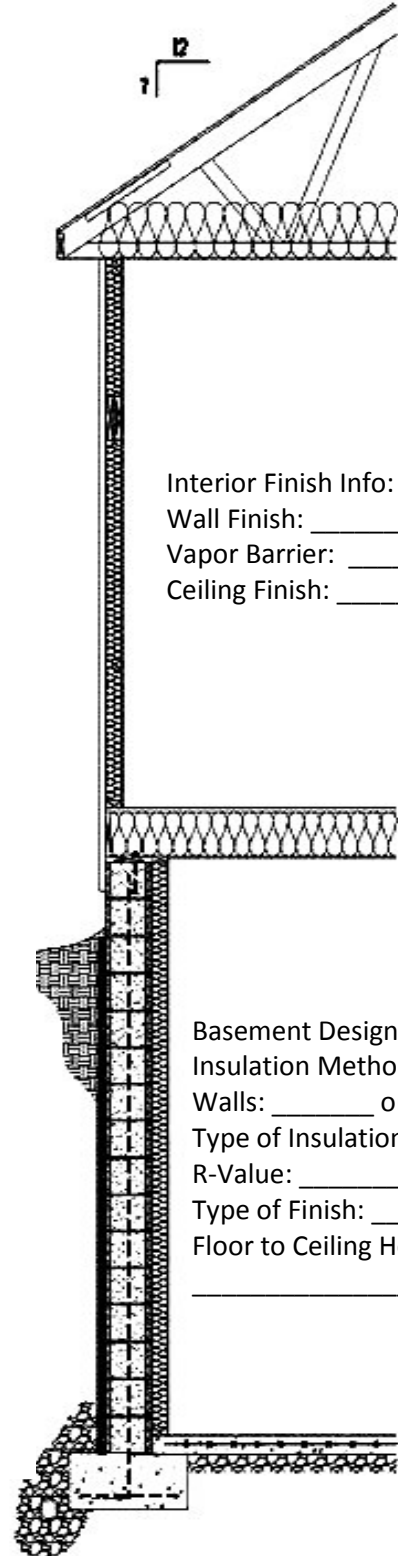
Frost Protection Depth: _____ Below Final Grade

Type of Sillplate: _____

Sillplate Anchoring Method: _____

Anchoring Spacing: _____

Basement Floor Thickness: _____



Interior Finish Info:

Wall Finish: _____

Vapor Barrier: _____

Ceiling Finish: _____

Basement Design Info:

Insulation Method:

Walls: _____ or Ceiling: _____

Type of Insulation: _____

R-Value: _____

Type of Finish: _____

Floor to Ceiling Height: _____