



# BOROUGH OF MILLERSVILLE BUILDING/ZONING PERMIT APPLICATION

## OFFICE USE ONLY

Date Received \_\_\_\_\_ Lot No \_\_\_\_\_ Account No \_\_\_\_\_ Permit No. \_\_\_\_\_

### A. Construction Details

Street Address \_\_\_\_\_ Subdivision \_\_\_\_\_ Lot Type  corner  interior

Application is for  New  Renovation  Addition  Change of Use  Repair/Replace  
 Sign  Home Occ  Curb and/or Sidewalk  Other

Proposed Use  Single Family  Two Family  Multi-Family  Other Building  Accessory Structure

Heating/Cooling  Gas  Oil  Electric  Geothermal  Central Air

Detail Description \_\_\_\_\_

Dwelling/Addition Width \_\_\_\_\_ Depth \_\_\_\_\_ #Stories \_\_\_\_\_ Square Footage \_\_\_\_\_

Accessory Structure Width \_\_\_\_\_ Depth \_\_\_\_\_ #Stories \_\_\_\_\_ Square Footage \_\_\_\_\_

Total Cost of Construction \_\_\_\_\_ Total Square Footage \_\_\_\_\_

### B. Owner/Contractor Information

Owner Name \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Applicant \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

### C. Authorization

Is application being made by owner of property \_\_\_\_\_? If not, by what authority \_\_\_\_\_

Estimated Starting Date \_\_\_\_\_

Estimated Completion Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

### D. Required with each Building Permit Application

- (3) sets of construction plans
- window and door schedule with U factors
- complete the workers' comp insurance form
- ResCheck or Energy worksheet
- stamped and signed truss drawings
- copy of workers' comp insurance certificate
- plot plan with lot size and setbacks
- include total cost of construction

## OFFICE USE ONLY

### ZONING HEARING BOARD

Appeal Number \_\_\_\_\_

Approval Date \_\_\_\_\_

Conditions  yes  no

### FEE SCHEDULE

Zoning Hearing Fee \_\_\_\_\_

### REVIEWS / APPROVALS

Yes No N/A

Building Plans

Zoning (Construction)

Stormwater Mgmt.

Sub-Division Land Dev.

Sewage System

Energy Plan

Historic Commission

Building Permit Fee \_\_\_\_\_

Zoning Permit Fee \_\_\_\_\_

SWM Filing/Insp. Fee \_\_\_\_\_

Escrow \_\_\_\_\_

Sewer Permit/Tap Fee \_\_\_\_\_

Curb and/or Sidewalk Fee \_\_\_\_\_

UCC Fee \_\_\_\_\_

Total Fees \_\_\_\_\_

Date Paid \_\_\_\_\_

Date Permit Granted / Denied \_\_\_\_\_

Code Enforcement Officer



# BOROUGH OF MILLERSVILLE BUILDING/ZONING PERMIT APPLICATION

## A. The applicant is:

1. A contractor within the meaning of Act 44 of the Pennsylvania Workers' Compensation Law

Yes                       No

If the answer is Yes, complete Sections B & C below, as appropriate

2. A Homeowner

Yes                       No

Note: If you are a homeowner applying for a Building Permit on behalf of a contractor, the contractor must complete this form and provide any required documentation.

## B. Insurance Information:

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

Federal or State Employer Identification Number \_\_\_\_\_

Applicant is a qualified self-insurer for Workers' Compensation.

Certificate attached

Name of Workers' Compensation Insurer \_\_\_\_\_

Workers' Compensation Insurance Policy Number \_\_\_\_\_

Workers' Compensation Insurance Policy Expiration Date \_\_\_\_\_

## C. Exemption:

Complete and notarize Section C if the Applicant is a contractor claiming exemption from providing Workers' Compensation Insurance.

The undersigned swears or affirms that he/she is not required to provide Workers' Compensation Insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

- Contractor with 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 Borough.
- Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Notary Public  
My commission expires: \_\_\_\_\_  
(SEAL)

Signature \_\_\_\_\_

Name of Firm \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Date \_\_\_\_\_

Failure to submit all or part of this information will result in denial of the building permit.

# INFORMATIONAL GUIDE FOR COMMERCIAL BUILDING PERMIT APPLICATION

---

The purpose of requiring a Building Permit is to verify code compliance in construction through the use of established code standards that exist for safety reasons. Below you will find information and guidelines to assist you with completing a Commercial Building Permit Application. Please contact the Code Enforcement Officer or visit our website ([www.weknowcodes.com](http://www.weknowcodes.com)) if you have additional questions concerning completion of the application. All ABI forms are available for download at <http://www.weknowcodes.com/commercial/forms-for-download.php>.

## COMMERCIAL BUILDING PERMIT (ABI-3)

---

ABI-3 Form is available for download at <http://www.weknowcodes.com/commercial/forms-for-download.php>

ALL REQUIRED INFORMATION MUST BE FILLED OUT COMPLETELY, including all Date and Signature Lines and the Total Cost of the Project, or Permit Application will not be accepted for process.

*BEFORE PERMIT APPLICATIONS ARE ACCEPTED AND THE PERMIT REVIEW PROCEDURES CAN BEGIN, ALL OF THE FOLLOWING STEPS MUST BE COMPLETED.*

After review of all submitted forms, the Municipal's Code Enforcement Officer will forward all application information to the Municipal's UCC Inspector. The "Formal UCC Review" Process has up to **30 Working Business Days** to approve or disapprove the permit.

Go to ABI's web site: <http://www.weknowcodes.com> and click on the "Residential" or "Commercial" photo for more information and answers to questions you may have regarding the inspection process.

Upon issuance of the building permit, the permit is required to be posted and visible from the public right-of-way. The permit approval requires compliance with all codes and ordinances, which the municipality has adopted.

One set of approved plans, specifications, and permit amendments will be returned with the permit. The approved set must remain on the job site until the final inspection and a Certificate of Use and Occupancy has been issued.

The permit applicant is responsible for making arrangements for inspections and insuring that a municipal Code Official has performed the required inspections.

*PLEASE READ AND CHECK ALL BOXES THAT APPLY.*

## REQUIREMENTS FOR ALL PERMIT APPLICATIONS

---

- Site plan must be drawn to scale.*
- Plans SHALL include all property lines, public streets, right-of-ways, all existing and proposed buildings, proposed improvements, driveways, sheds, and other buildings.*

- Do plans indicate design construction code, and code year, any referenced standards and standards year?*
- Are 3 complete sets of documents provided? Including site plans?*
- Additions or alterations to an existing building must be submitted with plans showing any previous approvals by L&I or the local building code department. Have you included one set of these plans in your submittal?*
- Do plans include documentation on any pre-engineered building members such as roof trusses, floor joist systems, or wall systems? Pre-engineered items are required to have SIGNED AND SEALED drawings.*
- The ABI-2 Form will serve as a checklist for all construction disciplines in all commercial projects. ABI-2 Form is available for download at <http://www.weknowcodes.com/commercial/forms-for-download.php>. This may be completed electronically by your design professional and printed out. For any item that applies to your project, check that item off on the ABI-2 Form and then provide documentation on the plans to support that item for construction. If you do not have this form, one will be provided for you at your request.*
- It is very important that you provide complete contact information for all persons who wish to receive copies of the plan reviews. Provide names, addresses, phone numbers, fax numbers, and e-mail addresses of all parties.*

You cannot provide too much detail...but you can provide too little!  
This checklist provides the minimum information required for permit submittal!

---

## THE CERTIFICATE OF USE AND OCCUPANCY

**NO OCCUPANCY is allowed without the  
Use & Occupancy Certificate granted by the Code Official.**

Please do not submit the permit until you have provided all the required minimum submittal information. If you are unsure of your submittal, please call us or visit our website.

---

## LABOR AND INDUSTRY

DO NOT CONTACT OR FILE ANY PAPERWORK WITH THE DEPARTMENT OF LABOR AND INDUSTRY FOR ACCESSIBILITY. ASSOCIATED BUILDING INSPECTIONS, INC. DOES ALL INSPECTIONS INCLUDING ACCESSIBILITY PLAN REVIEWS AND INSPECTIONS. YOU WILL NEED TO CONTACT THE ELEVATOR AND THE BOILER & UNFIRED PRESSURE VESSEL DIVISION AS APPLICABLE, AS WELL AS ANY OTHER STATE OR FEDERAL AGENCIES AS APPLICABLE TO YOUR PROJECT.

Failure to read and comply with the following document may result in a delay in the issuance of a building permit. It is to your benefit to carefully read ALL the following.

## DEFERRED SUBMITTALS

---

Per UCC Regulations, Administrative Section 403.43(k), it is not mandatory that the Code Official accept deferred submittals. In order to minimize costly design errors the permit applicant shall make every attempt to submit a full permit package. If due to seasonal concerns or other unforeseen circumstances the entire package is not available at the time of a permit application the design professional shall be required to follow all procedures as set forth under the Uniform Construction Code with regards to deferred submittals.

PA UCC Section 403.43(k)

- (k) A building code official may allow deferred submittals of portions of the design of the building and structure from the time of the application until a specified time set by the building code official. All of the following apply to deferred submittals:
- (1) The building code official shall provide prior approval of the deferral of any submittal items.
  - (2) A licensed architect or professional engineer is responsible to list the deferred submittals on the construction documents for review by the building code official.
  - (3) A licensed architect or professional engineer shall first review submittal documents for deferred submittal items and place a notation on the documents that the architect or engineer reviewed the documents and that the documents are in general conformance with the design of the building or structure.
  - (4) Deferred submittal items may not be installed until the building code official approves the design and submittal documents for the deferred submittal items.

## REQUIRED PERMIT SUBMITTAL INFORMATION

---

- Three complete sets of building plans, signed and sealed by a registered design professional, shall be submitted showing all structural, architectural, site plot plans, electrical, energy/insulation (Com-Chek), plumbing, mechanical, fire detection, and fire suppression systems used in the construction. **The cover page of all three sets of these plans shall indicate the applicable building code design criteria as adopted by the municipality.** For example: IBC2009, IMC2009, 2005 NEC, etc. as well as design criteria such as wind speed, energy, seismic design, snow loads, etc. Work of a “minor” nature may be exempt from this requirement. Verify with the Code Official.*
- Complete attached Form ABI-3 Form, “Application for Building Permit,” and ABI-2 Form, “UCC Plan Review Checklist.” These forms are available for download at <http://www.weknowcodes.com/commercial/forms-for-download.php>*
- Any spaces on the forms that are not applicable to your project should be marked N/A.*
- Accelerated approvals will be processed for emergencies only such as fire, flood, acts of nature, etc.*
- The Design Professional shall complete form ABI-6 Form, the “Special Inspections and Observations Statement.” This form is available for download at <http://www.weknowcodes.com/commercial/forms-for-download.php>*

- ❑ *VERY IMPORTANT: Provide FAX, e-mail, and telephone numbers with your application so we may correspond with you should any questions arise. We will attempt to e-mail rather than cold-call you so you are prepared to answer any questions regarding your application. We are also required to keep copies of all correspondence as it relates to the building permit.*
- ❑ *A document indicating the "Scope of Work" shall be included with the building plans. This is especially important for renovation work or additions.*

---

### **EXISTING STRUCTURES**

---

All plans submitted shall meet the requirements of the ICC International Building Code chapter on "Existing Structures" or the ICC International Existing Building Code.

Additional plan review fees and/or inspection fees shall be assessed to the permit applicant for changes to stamped plans. **Prior to receiving a Certificate of Use and Occupancy, all fees shall be paid in full. NO EXCEPTIONS.**

---

### **DISCLAIMER**

---

The information presented above is the basic requirements for commercial construction and is not be relied upon for the complete requirements for commercial construction. It is to your advantage to use a design professional or a professional contractor to assist you with those areas of construction with which you are unfamiliar. Unfamiliarity with the building codes may cause unplanned delays and unforeseen costs to comply with building regulations. **Plan ahead!**

**I have read and agree to comply with the above information.**

Signature:

\_\_\_\_\_

Site Address of Proposed  
Construction:

\_\_\_\_\_

Date:

\_\_\_\_\_

## CONTRACTOR LISTING

*It is very important that you provide complete contact information for all persons who wish to receive copies of the plan reviews. Provide **names, addresses, phone numbers, fax numbers** and if possible **e-mail addresses** of all parties.*

Permit No.: \_\_\_\_\_

Site

Address: \_\_\_\_\_

<b>General Contractor</b>		<i>L&amp;I #:</i>
<i>Business Name:</i>		
<i>Contact:</i>		<i>Phone #:</i>
<i>Address:</i>		<i>E-mail:</i>
<i>City:</i>	<i>State:</i>	<i>Zip Code:</i>
<i>FAX:</i>	<i>Mobile #:</i>	<i>Pager #:</i>

<b>Electrical Contractor</b>		<i>L&amp;I #:</i>
<i>Business Name:</i>		
<i>Contact:</i>		<i>Phone #:</i>
<i>Address:</i>		<i>E-mail:</i>
<i>City:</i>	<i>State:</i>	<i>Zip Code:</i>
<i>FAX:</i>	<i>Mobile #:</i>	<i>Pager #:</i>

<b>Plumbing Contractor</b>		<i>L&amp;I #:</i>
<i>Business Name:</i>		
<i>Contact:</i>		<i>Phone #:</i>
<i>Address:</i>		<i>E-mail:</i>
<i>City:</i>	<i>State:</i>	<i>Zip Code:</i>
<i>FAX:</i>	<i>Mobile #:</i>	<i>Pager #:</i>

<b>HVAC Contractor</b>		<i>L&amp;I #:</i>
<i>Business Name:</i>		
<i>Contact:</i>		<i>Phone #:</i>
<i>Address:</i>		<i>E-mail:</i>
<i>City:</i>	<i>State:</i>	<i>Zip Code:</i>
<i>FAX:</i>	<i>Mobile #:</i>	<i>Pager #:</i>

<b>Permit Application Contact</b>		<i>L&amp;I #:</i>
<i>Business Name:</i>		
<i>Contact:</i>		<i>Phone #:</i>
<i>Address:</i>		<i>E-mail:</i>
<i>City:</i>	<i>State:</i>	<i>Zip Code:</i>
<i>FAX:</i>	<i>Mobile #:</i>	<i>Pager #:</i>

## UCC PLAN REVIEW CHECKLIST

This checklist must accompany permit applications for new building/structures, additions and renovation projects (those which exceed the scope of Alterations-Level 1)

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 number and e-mail address):	Telephone:
	Fax:
	E-mail:

### General Requirements:

All drawings, shall be sealed, signed, and dated by a design professional (licensed architect or engineer). The only exception is when all of the following apply:

1. The proposed work only involves remodeling or alterations of an existing building or structure.
2. The proposed work does not change the building's structure or means of egress.
3. The person preparing the plans is not compensated for the preparation of the drawings.

All drawings must be neatly drawn with clean, crisp lettering. They must remain legible after reduction for microfilming.

Computer-generated vicinity maps obtained from web-based services (such as MapQuest) are acceptable, as long as the roadways or street names are legible and will remain that way after reduction for microfilming.

When photographs (including digital) are submitted to show building elevations, the images must be in focus and correctly exposed.

A Pennsylvania Department of Transportation (PennDOT) permit allowing access to a highway under its jurisdiction is not required at the time that application is made for a UCC building permit. If the highway occupancy permit issued by PennDOT requires a location of the building/structure differing from that approved under the UCC building permit, applicants must send the Department a letter requesting a determination whether a revision of approved plans will be required.

While we understand that many items on this checklist may not be included in some alteration or renovation projects, we request that all applicants work through the entire checklist to ensure that any necessary items are included. If any item is not necessary, please check N/A ("not applicable). This will greatly facilitate review and approval of projects.

If any of the non-mandatory sections (any sections other than Site Plans and Architectural Plans) in this document do not apply to the proposed work, please check the "NA" box beside the section title (rather than fill in "NA" next to each item in that section).

**SITE PLANS:**

<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	b. Show the correct street address, parcel number and required municipal zoning (if there is local zoning ordinance) on the site plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	c. Show and identify all property lines and rights-of-way, with distance from property lines and adjacent buildings on site plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	d. Show all accessible parking spaces and signage per ICC/ANSI A117.1 and the <i>International Building Code</i> on site plan.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Show accessible curb cuts, ramps, and access ways to the building.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Show all existing and proposed driveway entrances.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	g. Identify adjacent land uses and zoning.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	h. Show all easements, flood ways, and required buffers.
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> N/A	i. Show existing and proposed utilities (with backflow preventers) to serve the site.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Show existing and proposed finish grades.
<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> N/A	k. Show details, sections, and elevations needed for construction.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. Show all buffer and screening landscaping.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Show all required parking and loading spaces and calculations.

**ARCHITECTURAL PLANS:**

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<p>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).</p> <p>b. Show all fire-rated walls (both existing and new) with their ratings, if not shown elsewhere.</p> <p>c. <i>Drawings submitted without required fire-rated walls shown will be rejected.</i></p>
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	d. Show the square footage of each floor on the corresponding floor plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Identify the names and uses of each room.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Furnish door schedule(s), including size, type, rating (if any) and hardware.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	g. Provide all glazing schedules.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	h. 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.)
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	i. Provide basement percentage-below-grade calculations.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Indicate roof slopes, drainage system and sized through wall scuppers, if applicable to the project.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	k. Show fixed seating for assembly occupancy to allow determination of occupancy posting required by <i>International Building Code</i> .
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. Show wall sections with proposed material sizes, construction and fire-rated assemblies.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Show proposed plumbing fixtures and privacy screens on the plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	<p>n. If masonry construction is proposed, include the following information:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Type of brick ties and spacing of weep holes</li> <li><input type="checkbox"/> Control joints</li> <li><input type="checkbox"/> Placement of wall flashing and reinforcement</li> </ul>
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	o. If appropriate for the proposed occupancy, plans should identify all hazardous material control areas, fire barriers, and the require 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 <i>International Building Code</i> .
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	p. Show the floor slab vapor barrier.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	q. Show foundation water-proofing, if applicable.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	r. 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	s. Show penthouse drawings.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	t. On the drawings provide 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	u. Show required ventilation louvers and vent sizes.

**STRUCTURAL PLANS:**  N/A

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	a. Show foundation plans indicating the proposed slab elevations and type of foundation (i.e., mat foundation, caissons, spread footings, etc.).
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	b. Provide preliminary soil analysis data done by a licensed engineer, if required.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	c. Indicate dimensions of foundations.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	d. Show type, size and location of piling and pile caps for pile foundation.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Indicate grade beam sizes.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Indicate a footing schedule defining footing sizes and the required reinforcing.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	g. Show the established footing depth below grade and method of frost protection allowed in section 1805.2.1 of the <i>International Building Code</i> .
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	h. Indicate the thickness of the floor slab, size of reinforcing, slab elevations, and type and details of foundations.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	i. Indicate location, size, and amount of reinforcing steel.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Show foundation corner reinforcing bars and minimum overlapping (as applicable to project structure).
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	k. Provide strength of concrete according to designed soil reports.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. Show beams, joists, girders, rafters, and/or truss layouts, and details of connections, structural steel stud gage, gage size, and connections.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Indicate the sizes and species of all wood members and their respective design strength.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	n. Show all columns, girders, joists, purlins, beams, and base plates; for wood construction show all headers.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	o. Provide a complete lintel schedule.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	p. Indicate the type of anchoring for steel bearing directly on masonry.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	r. Where applicable, indicate on roof framing plan where concentrated loads (mechanical equipment, cranes, etc.) will be placed.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	s. Indicate on foundation and framing plans the location and lateral load resisting system. (Show alls, braced frames, moment connections, etc.)

**FIRE PROTECTION PLANS:**  N/A

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	a. Complete a sprinkler design data sheet and include it on the first plan of the sprinkler drawings.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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 the initial plan submission. If

		<p>this is the case, write in "NA" but note the following:</p> <ul style="list-style-type: none"> <li>• These shop drawings must be submitted for Department review and approval at <b>least two weeks before the projected installation date.</b></li> <li>• 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.</li> </ul>
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	c. Show ceiling plans with sprinkler head(s) layout, walls, soffits, openings, doors, dimensions and room identities.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	d. Verify system design by providing hydraulic calculations along with the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Recent water flow test</li> <li><input type="checkbox"/> 10 percent safety margin</li> <li><input type="checkbox"/> Type of backflow-preventer or reduced pressure zone showing equivalent foot loss</li> <li><input type="checkbox"/> Fire pump summary</li> </ul>
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Note the type of sprinkler system used (e.g., 13, 13D, or 13R).
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. For residential occupancies such as apartments and condominiums, show sprinkler head locations at breezeways, if applicable.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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. 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Indicate commodity class (per section 2303 of the <i>International Building Code</i> ) and height of any storage.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	k. Provide Material Safety Data Sheets for any hazardous materials (also specified under " <b>Architectural Plans</b> ").
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. 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

Hydraulically calculated and pipe schedule fire systems should be designed with a 10 percent safety margin for all new buildings and additions to existing buildings. Calculations for hydraulic systems should include:

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	a. Flow and pressure at each flowing sprinkler head.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	b. Flow diagram for a grid system.

**PLUMBING PLANS:**  N/A

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	a. Show a site utilities plan, if not provided with the civil drawings. <ul style="list-style-type: none"> <li><input type="checkbox"/> Show the domestic water, fire, and irrigation services.</li> <li><input type="checkbox"/> Show the location of water meters, backflow protection type and location.</li> <li><input type="checkbox"/> Show the sanitary sewer service from building to public sewer or approved private sewage disposal system.</li> </ul>
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	b. Show interceptors as applicable to project and size by flow rate. (i.e., grease, oil, lint, acid, sand).
<input type="checkbox"/> Yes	<input type="checkbox"/> 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 schedule necessary to

		define the system being installed.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	d. Show the location of all major components required for a complete system.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Identify all fixtures on floor plans and in riser diagrams with the plumbing fixture schedule number.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	i. Show the water, sanitary drain-waste-vent piping and storm leaders/drains. Indicate sizes and materials for above/below grade.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Show slope of horizontal sanitary and storm drains that equal or exceed 3" diameter, if less than 1/8" per foot.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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)
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. Show toilet room layouts with minimum of 1/4" = 1 foot scale.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Show drinking fountain locations.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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 number systems.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	o. Room names and numbers for each floor should be on a floor plan for each level.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	p. Provide minimum facilities calculations.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	q. Column line notations, if provided on the architectural/structural plans, shall be indicated on the plumbing plans.

**MECHANICAL PLANS:**  N/A

<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	a. Show all required wall louvers, penetrations, and fans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	b. Indicate roof-mounted equipment locations.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	c. Show all mechanical equipment, piping, ductwork (above/below slab) on the mechanical floor and/or roof plan.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Indicate air distribution devices and show cfm for all supply, return, and exhaust devices.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Indicate the location of all equipment components required for a complete system.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	g. Show the smoke ventilation of atriums and pressurization of high-rise stairwells.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	h. Show condensation drains, primary and secondary, from the unit to the point of discharge.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	i. Indicate toilet exhaust requirements
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	j. Show mechanical room layouts at sufficient scale for dimensions and details to be ascertained.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	k. Show the size of duct runs.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	l. Indicate controls for fan shutdown: emergency manual and automatic smoke detection.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Show the location of all UL 555-certified fire dampers, ceiling radiation dampers,

		smoke dampers, and fire doors.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	n. Show all fire-rated walls (both existing and new) with their ratings on the mechanical plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	o. All penetrations of fire-rated construction must be per manufacturer's details.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	p. Room names and numbers for each floor should be on a floor plan for each level.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	q. Provide outside air ventilation rate per the <i>International Mechanical Code</i> .
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	r. Column line notations, if provided on the architectural/structural plans, shall be identified on the mechanical plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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

<input type="checkbox"/> Yes	<input type="checkbox"/> 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 co-ordination.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	c. Indicate number of services and their physical locations; clearly indicate mains and characteristics.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	e. Show physical locations of all new and/or affected panels and switchgear (indicate front).
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	f. Indicate receptacle plans with circuitry.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	g. Indicate lighting plans with circuitry.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	h. Show electrical plans for each affected floor, including the roof.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	i. Show wiring method(s), conduit sizes and types, termination temperature (60, 75, 90) requirements, conductor sizes, and insulation types.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.).
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.).
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	m. Indicate all motor horse power ratings, if not supplied elsewhere.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	n. Indicate the certified testing laboratory or agency (e.g., UL), 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.
<input type="checkbox"/> Yes	<input type="checkbox"/> N/A	p. Provide all applicable <i>International Energy Conservation Code</i> compliance data on the Building Code Summary sheet or on the electrical plans.
<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)
--	--	------------------------



ABI #: \_\_\_\_\_  
 Permit #: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Form ABI-3 REV 7-2013

1248 W. Main St., Suite 23, Ephrata, PA 17522  
 Phone: (717) 733-1654; FAX (717) 721-4224  
[www.weknowcodes.com](http://www.weknowcodes.com)

Uniform Construction Code (UCC)

## APPLICATION FOR BUILDING PERMIT

<b>Application Type</b> (Check all that apply)	<input type="checkbox"/> Accessibility Only Review <input type="checkbox"/> Alteration or Renovation <input type="checkbox"/> New Structure or Facility <input type="checkbox"/> Plan Revision or Partial Occupancy Request <input type="checkbox"/> Unapproved Existing Building <input type="checkbox"/> New Building	<input type="checkbox"/> Addition <input type="checkbox"/> Phased Approval <input type="checkbox"/> If Phased Approval indicate total number of phases and describe scope of work for each phase. A plan shall be submitted with an outline defining each phase of the plan.														
<b>Use/Occupancy Classification:</b> Check box to left of applicable group. (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 <input type="checkbox"/> R-4 <input type="checkbox"/> S-1 <input type="checkbox"/> S-2 <input type="checkbox"/> U															
<b>Site Information</b> (Political Subdivision & County names are required.)	Project Name _____ Street Name and # _____ City _____ State _____ Zip Code _____ Political Subdivision _____ County _____															
<b>Special Requirements and Documentation</b>	Check each block below indicating that all of the following will be submitted with this application: <input type="checkbox"/> Three (3) site plans <input type="checkbox"/> Three (3) complete sets of construction drawings <input type="checkbox"/> One (1) completed copy of the ABI-2 UCC PLAN REVIEW CHECKLIST <input type="checkbox"/> One (1) set of specifications (only if Addition, Alteration, New Building or New Structure/Facility) <input type="checkbox"/> PDF files of design drawings <hr/> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">Does this construction involve modular units built in a factory</td> <td style="width:20%;"><input type="checkbox"/> Yes   <input type="checkbox"/> No</td> <td style="width:40%;">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.</td> </tr> <tr> <td>Is this construction regulated by the Health Care Facilities Act?</td> <td><input type="checkbox"/> Yes   <input type="checkbox"/> No</td> <td>If "Yes", submit 1 copy of approval letter from the Pennsylvania Department of Health.</td> </tr> <tr> <td>Is this construction exempt from energy code requirements?</td> <td><input type="checkbox"/> Yes   <input type="checkbox"/> No</td> <td>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, §2.3(B). If "No", submit 1 copy of the COMcheck-EZ Certificate or the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.</td> </tr> </table>							Does this construction involve modular units built in a factory	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", submit 1 copy of approval letter from the Pennsylvania Department of Health.	Is this construction exempt from energy code requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> 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, §2.3(B). If "No", submit 1 copy of the COMcheck-EZ Certificate or the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.
Does this construction involve modular units built in a factory	<input type="checkbox"/> Yes <input type="checkbox"/> 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?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", submit 1 copy of approval letter from the Pennsylvania Department of Health.														
Is this construction exempt from energy code requirements?	<input type="checkbox"/> Yes <input type="checkbox"/> 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, §2.3(B). If "No", submit 1 copy of the COMcheck-EZ Certificate or the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.														

	Is project in flood hazard area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", submit 1 copy of one of the flood hazard certifications mandated in section 1612.5 of the <i>International Building Code</i> .
	Are any of the <i>International Building Code</i> (Chapter 17) special inspection or structural observations required?	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", submit 1 copy of the ABI-6 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 "Yes", submit a signed statement indicating that the proposed method or material meets the requirements of 34 PA Code §403.44.
	Is this application for "temporary certificate of occupancy"(Phased Approval)?  A building code official may issue a temporary certificate of occupancy (Phased Approval)for a portion or portions of the building or structure before the completion of the entire work covered by the permit if the portion or portions may be occupied safely. The building code official shall set a time period during which the temporary certificate of occupancy is valid.	<input type="checkbox"/> Yes <input type="checkbox"/> No	If "Yes", submit a letter signed by the design professional and owner acknowledging that the request for phased construction. For Phased Approval applicant shall indicate total number of phases and describe scope of work for each phase. A plan shall be submitted with an outline defining each phase of the plan. Inspection fees shall be based on a cost per phase. Plan review fees may, depending on level of submittal, cover entire project or each phase only per judgment of plans examiner.
	Construction Phase Requiring Certificate of Use & Occupancy	<input type="checkbox"/> Yes <input type="checkbox"/> No	Which Phases?

<b>Project Data</b>	Does the project have zoning approval? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Type(s) of construction per Chapter 6 of the <i>International Building Code</i> (check all that apply): <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  Fire suppression: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None  If application applies to an existing building that is "legally occupied," indicate permits held: Fire and Panic Occupancy Permit <input type="checkbox"/> Fire Number: _____ Municipal Occupancy Permit <input type="checkbox"/> Permit Number: _____ Municipality Name: _____ L&I UCC Certificate of Occupancy <input type="checkbox"/> File Number: _____  If "legally occupied," you must select which code requirements the building will comply with (choose only one): <input type="checkbox"/> <i>International Existing Building Code</i> <input type="checkbox"/> Chap. 34, <i>International Building Code</i> Which triennial codes must this work comply with? <input type="checkbox"/> 2003 <input type="checkbox"/> 2006 <input type="checkbox"/> 2009



**ASSOCIATED BUILDING  
INSPECTIONS, INC.**

1248 W. Main St., Ste. 23  
Ephrata, PA 17522  
Phone: 717-733-1654  
FAX: 717-733-1654  
www.weknowcodes.com

Pennsylvania Uniform Construction Code

# Special Inspections and Observation Statement

ABI File # \_\_\_\_\_  
Municipal Permit # \_\_\_\_\_  
Date: \_\_\_\_\_

This statement must accompany permit applications for all construction for which special inspections and observations are required in Chapter 17 of the <i>International Building Code (IBC)</i> .	
Project Name:	
Project Address:	
Owner:	Telephone:
e-mail:	

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 department 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

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

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

\_\_\_\_\_  
Date signed (Month/Day/Year)

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	<b>CREDENTIALS</b> Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.
<input type="checkbox"/>	Inspection of Fabricators		
<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 Pile Foundations		

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	<b>CREDENTIALS</b> Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.
<input type="checkbox"/>	Inspection of Pier Foundations		
<input type="checkbox"/>	Inspection of Wood Panels and Veneers		
<input type="checkbox"/>	Inspection of Sprayed Fire-Resistant Materials		
<input type="checkbox"/>	Inspection of Smoke Control		
<input type="checkbox"/>	Inspection of Exterior Insulation & Finish System (EIFS)		
<input type="checkbox"/>	Structural Observations		
<input type="checkbox"/>	Inspection of Mastic and Intumescent Fire-Resistant Coatings		

**Final Report:**

**Note:**

*This page to be filled out and submitted to the building code official at the completion of the project before the Certificate of Use and Occupancy is issued.*

**Required Special Inspections or Observations:**

- |  |   |
|--|---|
| <input type="checkbox"/> Inspection of Fabricators           | <input type="checkbox"/> Inspection of Pile Foundations                               |
| <input type="checkbox"/> Inspection of Steel Construction    | <input type="checkbox"/> Inspection of Pier Foundations                               |
| <input type="checkbox"/> Inspection of Concrete Construction | <input type="checkbox"/> Inspection of Wood Panels and Veneers                        |
| <input type="checkbox"/> Inspection of Masonry Construction  | <input type="checkbox"/> Inspection of Sprayed Fire-Resistant Materials               |
| <input type="checkbox"/> Inspection of Wood Construction     | <input type="checkbox"/> Inspection of Smoke Controls                                 |
| <input type="checkbox"/> Inspection of Soil Conditions       | <input type="checkbox"/> Inspection of Exterior Insulation & Finish System (EIFS)     |
| <input type="checkbox"/> Structural Observations             | <input type="checkbox"/> Inspection of Mastic and Intumescent Fire-Resistant Coatings |

I certify that I have reviewed the report on each of the inspections or observations check 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.



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

\_\_\_\_\_  
Date Signed (Month/Day/Year)

**KEY for use in CREDENTIALS column (on pages 2 and 3)**

ACI	American Concrete Institute Certified Concrete Field Testing Technician
AWS	American Welding Society Certified Welding Inspector
ASNT	American Society of Non-Destructive Testing
AWCI	Association of Wall and Ceiling Industries
MCA	Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification
PA	Professional Architect (currently licensed)
PE	Professional Engineer (currently licensed)
OTHER	Specialized training coursework or other basis for competency deemed acceptable

**TABLE 1704.3**  
**REQUIRED VERIFICATION AND INSPECTION OF STEEL CONSTRUCTION**

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	CONTINUOUS	PERIODIC	REFERENCED STANDARD
	1. Material verification of high-strength bolts, nuts, and washers:			
<input type="checkbox"/>	a. Identification markings to conform to ASTM standards specified in the approved construction documents.	—	X	AISC 360 Section A3.3 and applicable ASTM material standards
<input type="checkbox"/>	b. Manufacturer's certificate of compliance required.	—	X	—
	2. Inspection of high-strength bolting:			
<input type="checkbox"/>	a. Snug-tight joints.		X	AISC 360 Section M2.5
<input type="checkbox"/>	b. Pretensioned and slip-critical joints using turn-of-nut with matchmarking, twist-off bolt or direct tension indicator methods of installation.	—	X	
<input type="checkbox"/>	c. Pretensioned and slip-critical joints using turn-of-nut without matchmarking or calibrated wrench methods of installation.	X	—	
	3. Material verification of structural steel and cold-formed steel deck.			
<input type="checkbox"/>	a. For structural steel, identification markings to conform to AISC 360.	—	X	AISC 360 Section M2.5
<input type="checkbox"/>	b. For other steel, identification markings to conform to ASTM standards specified in the approved construction documents.	—	X	Applicable ASTM material standards
<input type="checkbox"/>	c. Manufacturer's certified test reports.	—	X	
	4. Material verification of weld filler materials.			
<input type="checkbox"/>	a. Identification markings to conform to AWS specification in the approved construction documents.	—	X	AISC 360 Section A3.5 and applicable AWS A5 documents
<input type="checkbox"/>	b. Manufacturer's certificate of compliance required.	—	X	—

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	CONTINUOUS	PERIODIC	REFERENCED STANDARD
	5. Inspection of welding:			
	a. Structural steel and cold-formed steel deck:			
<input type="checkbox"/>	1) Complete and partial joint penetration groove welds.	X	—	AWS D1.1
<input type="checkbox"/>	2) Multipass fillet welds.	X	—	
<input type="checkbox"/>	3) Single-pass fillet welds > 5/16"	X	—	
<input type="checkbox"/>	4) Plug and slot welds.	X	—	
<input type="checkbox"/>	5) Single-pass fillet welds ≤ 5/16"	—	X	
<input type="checkbox"/>	6) Floor and roof deck welds.	—	X	AWS D1.3
	b. Reinforcing steel:			
<input type="checkbox"/>	1) Verification of weldability of reinforcing steel other than ASTM A 706.	—	X	AWS D1.4 ACI 318: Section 3.5.2
<input type="checkbox"/>	2) Reinforcing steel resisting flexural and axial forces in intermediate and special moment frames, and boundary elements of special structural walls of concrete and shear reinforcement.	X	—	
<input type="checkbox"/>	3) Shear reinforcement.	X	—	
<input type="checkbox"/>	4) Other reinforcing steel.	—	X	
	6. Inspection of steel frame joint details for compliance.			
<input type="checkbox"/>	a. Details such as bracing and stiffening.	—	X	—
<input type="checkbox"/>	b. Member locations.	—	X	
<input type="checkbox"/>	c. Application of joint details at each connection.	—	X	

For SI: 1 inch – 25.4 mm.

a. Where applicable, see also Section 1707.1. Special inspection for seismic resistance.

**TABLE 1704.4**  
**REQUIRED VERIFICATION AND INSPECTION OF CONCRETE CONSTRUCTION**

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	CONTINUOUS	PERIODIC	REFERENCED STANDARD	IBC REFERENCE
<input type="checkbox"/>	1. Inspection of reinforcing steel, including prestressing tendons, and placement.	—	X	ACI 318: 3.5, 7.1-7.7	1913.4
<input type="checkbox"/>	2. Inspection of reinforcing steel welding in accordance with Table 1704.3, Item 5b.	—	—	AWS D1.4 ACI 318: 3.5.2	—
<input type="checkbox"/>	3. Inspection of bolts to be installed in concrete prior to and during placement of concrete where allowable loads have been increased or where strength design is used.	X	—	ACI 318: 8.1.3, 21.2.8	1911.5, 1912.1
<input type="checkbox"/>	4. Inspection of anchors installed in hardened concrete.	—	X	ACI 318: 3.8.6, 8.1.3, 21.2.8	1912.1
<input type="checkbox"/>	5. Verifying use of required design mix.	—	X	ACI 318: Ch. 4, 5.2-5.4	1904.2.2, 1913.2, 1913.3
<input type="checkbox"/>	6. At the time fresh concrete is sampled to fabricate specimens for strength tests, perform slump and air content tests, and determine the temperature of the concrete.	X	—	ASTM C 172 ASTM C 31 ACI 318: 5.6, 5.8	1913.10
<input type="checkbox"/>	7. Inspection of concrete and shotcrete placement for proper application techniques.	X	—	ACI 318: 5.9, 5.10	1913.6, 1913.7, 1913.8
<input type="checkbox"/>	8. Inspection for maintenance of specified curing temperature and techniques	—	—	ACI 318: 5.11-5.13	1913.9
<input type="checkbox"/>	9. Inspection of prestressed concrete: a. Application of prestressing forces. b. Grouting of bonded prestressing tendons in the seismic-force-resisting system.	X	—	ACI 318: 18.20 ACI 318: 18.18.4	—
<input type="checkbox"/>	10. Erection of precast concrete members.	—	X	ACI 318: Ch. 16	—
<input type="checkbox"/>	11. Verification of in-situ concrete strength prior to stressing of tendons in posttensioned concrete and prior to removal of shores and forms from beams and structural slabs.	—	X	ACI 318: 6.2	—
<input type="checkbox"/>	12. Inspect formwork for shape, location and dimensions of the concrete member being formed.	—	X	ACI 318: 6.1.1	—

For SI: 1 inch = 25.4 mm

a. Where applicable, see also Section 1707.1, Special inspection for seismic resistance

**TABLE 1704.5.1**  
**LEVEL 1 REQUIRED VERIFICATION AND INSPECTION OF MASONRY CONSTRUCTION**

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	FREQUENCY OF INSPECTION		REFERENCE FOR CRITERIA		
		CONTINUOUS	PERIODIC	IBC SECTION	TMS 402/ACI 530/ASCE 5 <sup>a</sup>	TMS 602/ACI 530.1/ASCE 6 <sup>a</sup>
<input type="checkbox"/>	13. Compliance with required inspection provisions of the construction documents and the approved submittals shall be verified.	—	X	—	—	Art. 1.5
<input type="checkbox"/>	14. Verification of $f'_m$ and $f'_{AAC}$ prior to construction except where specifically exempted by this code.	—	X	—	—	Art 1.4B
<input type="checkbox"/>	15. Verification of slump flow and VSI as delivered to the site for self-consolidating grout.	X	—	—	—	Art. 1.5B.1.b.3
	16. As masonry construction begins, the following shall be verified to ensure compliance.					
<input type="checkbox"/>	a. Proportions of site-prepared mortar.	—	X	—	—	Art. 2.6A
<input type="checkbox"/>	b. Construction of mortar joints	—	X	—	—	Art 3.3B
<input type="checkbox"/>	c. Location of reinforcement, connectors, prestressing tendons and anchorages.	—	X	—	—	Art. 3.4, 3.6A
<input type="checkbox"/>	d. Prestressing technique.	—	X	—	—	Art. 3.6B
<input type="checkbox"/>	e. Grade and size of prestressing tendons and anchorages.	—	X	—	—	Art. 2.4B, 2.4H
	17. During construction the inspection program shall verify:					
<input type="checkbox"/>	a. Size and location of structural elements.	—	X	—	—	Art. 3.3F
<input type="checkbox"/>	b. Type, size, and location of anchors, including other details of anchorage of masonry to structural members, frames or other construction.	—	X	—	Sec. 1.2.2(e), 1.16.1	—
<input type="checkbox"/>	c. Specified size, grade, and type of reinforcement, anchor bolts, prestressing tendons, and anchorages.	—	X	—	Sec. 1.15	—
<input type="checkbox"/>	d. Welding of reinforcing bars.	X	—	—	Sec. 2.1.9.7.2, 3.3.3.4(b)	—

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	FREQUENCY OF INSPECTION		REFERENCE FOR CRITERIA		
<input type="checkbox"/>	e. Preparation, construction, and protection of masonry during cold weather (temperature below 40°F) or hot weather (temperature above 90°F).	—	X	Sec. 2104.3, 2104.4	—	
<input type="checkbox"/>	f. Application and measurement of prestressing force.	X	—	—	—	Art. 3.6B
	18. Prior to grouting, the following shall be verified to ensure compliance:					
<input type="checkbox"/>	a. Grout space is clean.	—	X	—	—	Art. 3.2D
<input type="checkbox"/>	b. Placement of reinforcement and connectors, and prestressing tendons and anchorages.	—	X	—	Sec. 1.13	Art. 3.4
<input type="checkbox"/>	c. Proportions of site-prepared grout and prestressing grout for bonded tendons.	—	X	—	—	Art. 2.6B
<input type="checkbox"/>	d. Construction of mortar joints.	—	X	—	—	Art. 3.3B
	19. Grout placement shall be verified to ensure compliance:	X	—	—	—	Art. 3.5
<input type="checkbox"/>	a. Grouting of prestressing bonded tendons.	X	—	—	—	Art. 3.6C
<input type="checkbox"/>	20. Preparation of any required grout specimens, mortar specimens and/or prisms shall be observed.	—	X	Sec. 2105.2.2, 2105.3	—	Art. 1.4

For SI: °C = [(°F) – 32]/1.8.

a. The specific standards reference are those listed in Chapter 35.

**TABLE 1704.5.3**

**LEVEL 2 REQUIRED VERIFICATION AND INSPECTION OF MASONRY CONSTRUCTION**

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	FREQUENCY OF INSPECTION		REFERENCE FOR CRITERIA		
		CONTINUOUS	PERIODIC	IBC SECTION	TMS 402/ACI 530/ASCE 5 <sup>a</sup>	TMS 602/ACI 530.1/ASCE 6 <sup>a</sup>
<input type="checkbox"/>	21. Compliance with required inspection provisions of the construction documents and the approved submittals shall be verified.	—	X	—	—	Art. 1.5
<input type="checkbox"/>	22. Verification of $f'_m$ and $f'_{AAC}$ prior to construction and for every 5,000 square feet during construction.	—	X	—	—	Art 1.4B
<input type="checkbox"/>	23. Verification of proportions of materials in premixed or preblended mortar and grout as delivered to the site.	—	X	—	—	Art. 1.5B
<input type="checkbox"/>	24. Verification of slump flow and VSI as delivered to the site for self-consolidating grout.	X	—	—	—	Art. 1.5B.1.b.3
	25. The following shall be verified to ensure compliance:					
<input type="checkbox"/>	f. Proportions of site-prepared mortar, grout, and prestressing grout for bonded tendons.	—	X	—	—	Art. 2.6A
<input type="checkbox"/>	g. Placement of masonry units and construction of mortar joints.	—	X	—	—	Art 3.3B
<input type="checkbox"/>	h. Placement of reinforcement, connectors, and prestressing tendons and anchorages.	—	X	—	Sec. 1.15	Art. 3.4, 3.6A
<input type="checkbox"/>	i. Grout space prior to grout.	X	—	—	—	Art. 3.2D
<input type="checkbox"/>	j. Placement of grout.	X	—	—	—	Art. 3.5
<input type="checkbox"/>	k. Placement of prestressing grout.	X	—	—	—	Art. 3.6C
<input type="checkbox"/>	l. Size and location of structural elements.	—	X	—	—	Art. 3.3F
<input type="checkbox"/>	m. Type, size, and location of anchors, including other details of anchorage of masonry to structural members, frames, or other construction.	X	—	—	Sec. 1.2.2(e), 1.16.1	—
<input type="checkbox"/>	n. Specified size, grade, and type of reinforcement, anchor bolts, prestressing tendons, and anchorages.	—	X	—	Sec. 1.15	Art. 2.4, 3.4

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION	FREQUENCY OF INSPECTION		REFERENCE FOR CRITERIA		
<input type="checkbox"/>	o. Welding of reinforcing bars.	X	—	—	Sec. 2.1.9.7.2, 3.3.3.4(b)	—
<input type="checkbox"/>	p. Preparation, construction, and protection of masonry during cold weather (temperature below 40°F) or hot weather (temperature below 90°F).	—	X	Sec. 2104.3, 2104.4	—	Art. 18.C, 1.8D
<input type="checkbox"/>	q. Application and measurement of prestressing force.	X	—	—	—	Art. 3.6B
<input type="checkbox"/>	26. Preparation of any required grout specimens and/or prisms shall be observed.	X	—	Sec. 105.2.2, 2105.3	—	Art. 1.4

For SI: °C = [(°F) – 32]/1.8, 1 square foot = 0.0929 m<sup>2</sup>.

a. The specific standards referenced are those listed in Chapter 35.

**TABLE 1704.7**  
**REQUIRED VERIFICATION AND INSPECTION OF SOILS**

CHECK IF APPLICABLE	VERIFICATION AND INSPECTION TASK	CONTINUOUS DURING TASK LISTED	PERIODICALLY DURING TASK LISTED
<input type="checkbox"/>	1. Verify materials below shallow foundations are adequate to achieve the design bearing capacity.	—	X
<input type="checkbox"/>	2. Verify excavations are extended to proper depth and have reached proper material.	—	X
<input type="checkbox"/>	3. Perform classification and testing of compacted fill materials.	—	X
<input type="checkbox"/>	4. Verify use of proper materials, densities and lift thicknesses during placement and compaction of compacted fill.	X	—
<input type="checkbox"/>	5. Prior to placement of compacted fill, observe subgrade and verify that site has been prepared properly.	—	X