



# 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 _____
Contractor _____	Address _____	Phone _____
Contractor _____	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

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**ZONING HEARING BOARD**

Appeal Number \_\_\_\_\_  
 Approval Date \_\_\_\_\_  
 Conditions  yes  no

**FEE SCHEDULE**

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

**REVIEWS / APPROVALS**

Yes No N/A

Building Plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Zoning (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stormwater Mgmt.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sub-Division Land Dev.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sewage System	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Energy Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Historic Commission	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Building Permit Fee	_____
Zoning Permit Fee	_____
SWM Filing/Insp. Fee	_____
Escrow	_____
Sewer Permit/Tap Fee	_____
Curb and/or Sidewalk Fee	_____
UCC Fee	_____
<b>Total Fees</b>	_____
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.

# RESIDENTIAL PERMIT SUBMISSION

## Documentation required for New Home Construction or Addition

Applicant shall provide two copies of all documentation. Incomplete submissions may delay the Plan Review process and subsequent issuance of a Building Permit.

### Architectural

- Provide dimension stair plans showing maximum riser height and minimum nose-to-nose tread depth.
- Provide site plans showing distances to other buildings on the same property and distances to lot lines.
- Show all required means of egress from bedrooms and basement levels.
- Show all egress window and door sizes, or provide manufacturer specifications.
- Show all code required fire separation items for an attached garage.
- Indicate the pitch of all roof levels.
- Show the locations of any areas where tempered glass is required by the code.

### Structural

- If pre-engineered truss plans are used provide truss plans.
- Provide a typical wall section detail from footings through the roof line.
- Provide details and location of all required narrow wall bracing.
- Submit two complete sets of building plans showing all structural design indicating lumber sizes and spacing, two copies of any engineered framing members such as trusses, Glu-Lams, LVL's, TGI's, etc. used in the construction. The cover page of all plan sets shall indicate the applicable building code design criteria based upon the UCC. {i.e. \_ \_ \_ \_ (year) IRC}

### Mechanical

- Provide specifications for all HVAC equipment. (Operating voltage, current, BTU output, etc.)
- Show the cfm output of all bathroom fans.

### Electrical

- Indicate the ampacity of the electrical service on the plans.
- Indicate the locations of the required smoke detectors on the plans.

### Plumbing

- Show the locations of all plumbing fixtures.

### Fire Protection

- Indicate the locations of the required smoke detectors on the plans.

### Energy

- Provide a ResCheck or PA Alternative Energy Code Compliance form.