

Requirement checklist to obtain a building permit for a:

COMMERCIAL BUILDING

- Completed 3 page Commercial Application (must be legible and signed)
- Land Use Permit (signed/approved by the Municipality)
- 2 sets of drawings (drawings must be signed and sealed by architect/engineer)
- 2 copies of site plan (include all existing structures, proposed structure and their distances to all lot lines)
- Submit the Current Certificate of Use and Occupancy if applicable (required when altering an existing structure or creating an addition to an existing structure).
- Energy compliance documentation if applicable to this project
- Copy of the Contractors Certificate of Liability Insurance if contracting out the work
OR
If doing the work yourself submit a signed Workers Compensation Certificate of Liability
- Driving directions from a known landmark or intersection

In addition to submitting 2 sets of construction drawings it is highly recommended an Electronic copy is submitted also (they can be submitted via email, thumb drive or compact disc). Failure to provide an electronic copy may result in additional charges.

- ✓ After submitting all required documents your application will be reviewed.
- ✓ PMCA will contact you to let you know if your application has been approved or denied.
- ✓ When the project is approved you will be notified the Building Permit is ready. Prior to obtaining the building permit all charges (i.e. administrative, inspections fees) must be paid.
- ✓ Be advised additional fees may be applied, throughout the project, for failed or missed inspections.

PA MUNICIPAL CODE ALLIANCE (405 Wayne Ave. Chambersburg, PA 17201 Phone: 717-496-4996)

Commercial Building Permit Application
for any Structure other than a One- or Two-Family Dwelling

(This Section For Official Use Only)

Building Permit Number: _____	Municipality _____ County _____	Date Applied: _____
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SECTION I: LOCATION

No. and Street _____	City /Town _____	Zip Code _____	Name of Building (if applicable) _____
Tax Parcel ID # _____	Block # and/or Lot # (if applicable) _____		

SECTION II: PROPOSED WORK

Edition of PA UCC/ICC used _____ If New Construction check here or check all that apply in the two rows below

Existing Building <input type="checkbox"/>	Repair <input type="checkbox"/>	Alteration <input type="checkbox"/>	Addition <input type="checkbox"/>	Demolition <input type="checkbox"/>
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Change of Use <input type="checkbox"/>	Change of Occupancy <input type="checkbox"/>	Other <input type="checkbox"/> Specify: _____
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Are building plans and/or construction documents being supplied as part of this permit application? Yes No

Brief Description of Proposed Work: _____

SECTION III: COMPLETE THIS SECTION IF THIS IS FOR AN EXISTING BUILDING UNDERGOING A RENOVATION, ADDITION, OR CHANGE IN USE OR OCCUPANCY

Additional Construction Alteration/Structural Egress Change Repair Renovation Change of Use/Occupancy
 Applicable Code: IBC IEBC Level of Alteration: I II III

Existing Use Group(s): _____	Proposed Use Group(s): _____
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SECTION IV: BUILDING HEIGHT AND AREA

	Existing		Proposed
No. of Floors/Stories (include basement levels) & Area Per Floor (sq. ft.)			
Total Area (sq. ft.) and Total Height (ft.)			

SECTION V: USE GROUP (Check as applicable)

A: Assembly A-1 A-2 A-3 A-4 A-5 Type: _____ **B: Business** **E: Educational**

F: Factory F-1 F2 **H: High Hazard** H-1 H-2 H-3 H-4 H-5

I: Institutional I-1 I-2 I-3 I-4 **M: Mercantile** **R: Residential** R-1 R-2 R-3 R-4

S: Storage S-1 S-2 **U: Utility** **Mixed Use** Describe: _____

Special Use Description: _____

SECTION VI: CONSTRUCTION TYPE (Check as applicable)

IA **IB** **IIA** **IIB** **IIIA** **IIIB** **IV** **VA** **VB**

SECTION VII: SITE INFORMATION

Flood Zone Information: Check if outside Flood Zone <input type="checkbox"/> or identify Zone: _____			
Hazards to Air Navigation: Is structure within airport approach area? Yes <input type="checkbox"/> No <input type="checkbox"/>			

SECTION VIII: CONTENT OF CERTIFICATE OF OCCUPANCY

Edition of Code: _____ Use Group(s): _____ Type of Construction: _____
 Does the building contain a Sprinkler System?: _____ Special Stipulations: _____
 Design Occupant Load per Floor and Assembly space: _____

SECTION IX: PROPERTY OWNER/APPLICANT INFORMATION

Name Property Owner and contact information:

Name (*Print*) _____ No. and Street _____ City/Town _____ Zip _____

Telephone No. (*business*) _____ Telephone No. (*cell*) _____ e-mail address _____

If applicable, the property owner hereby authorizes:

Name _____ Street Address _____ City/Town _____ State _____ Zip _____

Telephone No. (*business*) _____ Telephone No. (*cell*) _____ e-mail address _____

to apply for and act on the property owner's behalf, in all matters relative to work authorized by this building permit application.

SECTION X: CONSTRUCTION DETAILS

X.i: Registered Design Professional Responsible for this Project

_____ Name (Registrant)	_____ Telephone No.	_____ e-mail address	_____ Registration Number	
_____ Street Address	_____ City/Town	_____ State	_____ Zip	_____ Discipline
				_____ Expiration Date

X.ii: General Contractor

Company Name _____ Name of Person Responsible for Construction _____ License No. and Type if Applicable _____

Street Address _____ City/Town _____ State _____ Zip _____

Telephone No. (*business*) _____ Telephone No. (*cell*) _____ e-mail address _____

SECTION XI

A Workers' Compensation Insurance Affidavit from must be completed and submitted with this application. Failure to provide this affidavit will result in the denial of the issuance of the building permit. Is a signed Affidavit submitted with this application? Yes No

SECTION XII: CONSTRUCTION COSTS AND PERMIT FEE

Item	Estimated Costs: (Labor and Materials)	START DATE: _____ FINISH DATE: _____ TOTAL NUMBER OF WEEKS: _____ TOTAL VALUE OF WORK: \$ _____
1. Building	\$ _____	
2. Electrical	\$ _____	
3. Plumbing	\$ _____	
4. Mechanical (HVAC)	\$ _____	
5. Other: _____	\$ _____	
6. Total Cost	\$ _____	

SECTION XIII: SIGNATURE OF PERMIT APPLICANT

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code official or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project. I further certify that this information is true and correct to the best of my knowledge and belief. Ref. 18 Pa. Cons. Stat. § 4903.

Please print and sign name _____ Title _____ Telephone No. _____ Date _____

Street Address _____ City/Town _____ State _____ Zip _____ Email Address _____

Appendix 1

Registered Professional Contact Information

Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		
Name (Registrant)	Telephone No.	e-mail address	Registration Number
Street Address	City/Town	State	Zip
Discipline	Expiration Date		

The checklist below is a partial list of documents that may be required. The applicant shall fill out the checklist and provide the contact information of the registered professionals responsible for the documents. This appendix is to be submitted with the building permit application.

Checklist for Construction Documents*

No.	Item	Mark "x" where applicable		
		Submitted	Incomplete	Not Required
1	Architectural			
2	Foundation			
3	Structural			
4	Fire Suppression			
5	Fire Alarm (may require repeaters)			
6	HVAC			
7	Electrical			
8	Plumbing (include local connections)			
9	Gas (Natural, Propane, Medical or other)			
10	Surveyed Site Plan (Utilities, Wetland, etc.)			
11	Specifications			
12	Structural Peer Review			
13	Structural Tests & Inspections Program			
14	Fire Protection Narrative Report			
15	Existing Building Survey/Investigation			
16	Energy Conservation Report			
17	Workers Compensation Insurance			
18	FEMA Elevation Certificates & other Flood Plain Documentation			
19	Other (Specify)			
20	Other (Specify)			
21	Other (Specify)			

*Deferred Submittals must be identified herein. Work so identified must not be commenced until this application has been amended and the proposed construction documents have been approved by the authority having jurisdiction.

PMCA Office Locations:
Mon to Fri 8 am to 4 pm

Chambersburg Office: 405 Wayne Ave. Chambersburg, PA 17201 **Phone:** 717 496-4996
Bedford Office: 125 S. Richard Street, Suite 102, Bedford, PA 15522 **Phone:** 814 310-2326
Somerset Office: 318 Georgian Place, Somerset, PA 15501 **Phone:** 814 444-6112