



Borough of Saint Lawrence

135 N Prospect St., Reading, PA 19606-1407
Office: (610) 779-1430 * Fax: (610) 779-9148
permits@stlawboro.us

UCC BUILDING PERMIT APPLICATION

All Areas indicated with an asterisk (*) are required fields, failure to complete all required information will result in rejection or delays in the Permit issuance.

☐ Residential (1 & 2 Family)

☐ Commercial

☐ Industrial

☐ Institutional

*

☐ EZR Permit

☐ EZC Permit

*** Property:**

* Address: _____

* Application Date: ____ / ____ / ____

* Tax ID #: _____

Application #: _____

* Zoning Approval #: _____

* Owner: _____ Home: () - _____ Email: _____
Address: _____ * Mobile: () - _____ Other: _____
Fax: () - _____

☐ **Occupant Same as Property Owner**

* Occupant: _____ Home: () - _____ Email: _____
* Mobile: () - _____ Other: _____

Contractor: _____	Office: () - _____	Trade Professional
Name: _____	Mobile: () - _____	Reg. #: _____
Address: _____	Fax: () - _____	Reg. Exp.: _____
	Email: _____	Ins. Exp.: _____

Architect: _____	Office: () - _____	Design Professional
Name: _____	Mobile: () - _____	PA Reg. #: _____
Address: _____	Fax: () - _____	Ins. Exp.: _____
	Email: _____	

*** Property Type:**

☐ 1 or 2 Family Dwelling

☐ Retail Store

☐ Warehouse

☐ Manufacturing

☐ Townhome

☐ Restaurant / Food Prep.

☐ Office Bldg

☐ Other (Explain)

☐ Multifamily Dwelling

☐ Health Care Facility

☐ Fitness Center

☐ Municipal

☐ Mixed Use

☐ Fuel Dispensing Facility

Other _____

*** Construction Type:**

☐ New Construction ☐ Repair ☐ Alteration ☐ Demolition ☐ Foundation ☐ Temporary ☐ Fence

☐ Swimming Pool ☐ Sign ☐ Deck ☐ Carport ☐ Roof ☐ Accessory Structure ☐ Other

Work Location (Area/Floor/Etc.)	Area or Work Space:	Number of Floors	Fair Market Value of Proposed Work
	sf		

Property Use:

Change In Use

* Zoning District: _____

Specific Use	Former Use	* Use Group	Max Live Load	Max Occupancy Load

*** Description of Proposed Work:**

Building Dimensions:

Building Area (Square Feet)			Building Height (Above Grade)	
Existing	Proposed	Total	Number of Stories	Height

Area of Largest Floor Space (Square Feet): _____

Site Characteristics:

Number of Residential Dwelling Units		Type of HVAC System (Gas/Oil/Electric/Geothermal, etc.)	Fire Places		
Existing	Proposed		Quantity	Fuel Type	Vent
Distance from Project to			Septic Permit #	PA-1 Call Serial #	
Well	Septic Tank	Drain Field			

Service:

Fuel (Gas/Oil/LPG)	Electric Amps.	Water (Private/Public)	Sewer (Public/Private)

Other Equipment:

	(Yes)	(No)	
Elevators/Escalators/Lifts/Moving Walks	☐	☐	
Sprinkler System	☐	☐	
Pressure Vessels (Water Heater/Boilers/Air Compressors)	☐	☐	
Refrigeration Systems (Air Conditioning/Commercial Refrigeration)	☐	☐	
<u>Flood Plain:</u>	(Yes)	(No)	(N/A)
Is the site located in a flood hazard area?	☐	☐	☐
Will any portion of the flood hazard area be developed?	☐	☐	☐

Owner/Agent shall verify that any proposed construction and/or development activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3

Lowest Floor Level: _____

Construction Documents:

Construction Plans and specifications must be attached illustrating elevations, floor plans, electrical, plumbing, mechanical, and fire layouts, energy code compliance data, design loads and calculations, window and door schedule, typical cross sections, typical footer and foundation details.

Site Plans:

Site Plans must be attached, showing the size and location of the new construction and existing structures on the site and the structure's distance from the property lines.

Insurance:

All Professional applicants are required to provide a Certificate of Insurance in the name of the Professional Applicant with a Minimum General Liability coverage of \$1,000,000 per occurrence, naming the "Borough of Saint Lawrence, 3540 Saint Lawrence Avenue, Reading, PA 19606" as the "Certificate Holder" at least once per calendar year.

Workers Compensation Insurance Coverage:

All Professional applicants are required to provide a Certificate of Insurance showing evidence of Workers Compensation Insurance Coverage as required by "The Pennsylvania Worker's Compensation Act" of 1915, P.L.736, No 338, as amended. If Professional applicant is claiming "No Employees" under this requirement the applicant must provide a Signed and Notarized copy of a Affidavit of Exemption from the Pennsylvania Workers Compensation Act.

Acknowledgment:

All applicants for permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the registered design professional employed in connection with the proposed work.

Authorized Agent/Lessee/Registered Design Professional:

The PROPERTY OWNER is ultimately responsible for all costs associated with the processing of this application after it is filed. Unpaid fees will result in a municipal lien placed upon the property for the cost of the permit, inspections, late fees, attorney's costs and court Filing Costs. To Certify an Authorized Agent/Lessee/Registered Design Professional, the PROPERTY OWNER is required to file a Notarized Statement granting the authority.

Violation Statement:

Is this Application the result of a Violation? ☐ Yes ☐ No Violation #: _____

****IMPORTANT NOTICE****

Failure to fill in ALL Required Fields will result in rejection or significant delays in the processing of your permit application!

The "Applicant" Certifies and Understands and Assumes that:

1. Applicants for all Commercial Building, Mechanical, Plumbing & Electrical Permits are required to be filled out by the Registered Trade Professional (RTP) within the respective trade, on behalf of the Commercial Property Owner. (Property Owners Approval Letter is Required)
2. All provisions and requirements of PA Act 45, (The Pennsylvania Uniform Construction Codes), the "Approved Construction Documents", and all current Ordinances & Resolutions of the Borough of Saint Lawrence will be met and complied with, whether specified herein or not.
3. The Issuance of a Permit & approval of Construction Documents shall not be construed as authority to violate, cancel or set aside any provisions of the UCC Codes or Ordinances of the Municipality or any other governing body.
4. He/she has a clear understanding of all of the applicable codes, ordinances and regulations and is sufficiently qualified to properly and safely perform and/or oversee the work described within this application for permit.
5. Property Owner or Owners Representatives are responsible for locating all property lines, setback lines, easements, house drains, laterals, rights-of-way, flood areas, etc.. Property Owner, Owners Representative or Applicant shall not construct or erect structures which encroach into any right-of-way.
6. Applicant assumes the responsibility of coordinating and scheduling all work and required inspections with the Property Owner and all Occupants.
7. The Property Owner gives permission and authority to the Code Official and Code Administrator's Authorized Representative to enter areas covered by such permit at any reasonable hour to enforce the provisions of the Code(s) applicable to such permit.
8. All submitted Plans, Construction Documents & Certifications approved by the Codes Department serve as an integral component of this application.
9. I further Certify that the statements contained herein are true and correct to the best of my knowledge and belief and that I am authorized by, and acting on behalf of the "Property Owner" identified herein to make this application, and that before I accept any Permit for which this application is made, the Property Owner shall be made aware by me of all conditions of the permit(s).
10. I Understand that if I knowingly make any false statements herein I am subject to such maximum penalties as prescribed in 18 Pa C.S. § 4909 relating to unsworn falsification to Authorities and other penalties as may be prescribed by Local, County, State & Federal Law.

* Applicant Signature:

Date: / /

* Applicant Name:

Building Fee Schedule:

Contractor Registration
Residential Minimum
Commercial Minimum
2% of Fair Market Value
Plan Review First Page
Plan Review each page after First
Penalty (Double Permit Fee)
State Fee (APPLIES TO ALL UCC PERMITS)

EZ Building Permit (Each Inspection)

Residential
Commercial
Residential Demo
Commercial Demo

Codes Department Use Only:

Date Received: _____

Received:

- ☐ Zoning Approval Granted
- ☐ Contractor Registered
- ☐ Application Complete
- ☐ Payment Received
- ☐ Insurance Cert Received
- ☐ Workers Comp or Affidavit Rcvd.
- ☐ Plans Received

Approval:

- ☐ FMV Approved
- ☐ Application Approved
- ☐ Insurance Approved
- ☐ Plans Approved
- ☐ Double Permit Fee
- ☐ Failed or Missed Inspection
- ☐ Walls closed before Rough

Certificates:

- ☐ Final Approval Cert. _____
- ☐ Final Cert to File
- ☐ Cert. of Occupancy
- ☐ All Certs Complete/Job Closed
- ☐ _____

Payment Amount: _____

Payment Type: _____

Notes:

Code Official Approval: _____

Date: / /

SUBMIT TO:
Borough of St. Lawrence
135 N Prospect St.
Reading PA 19606-1407

Borough Office: 610-779-1430
Borough Fax: 610-779-9148
permits@stlawboro.us

Inspector:
Office:
Mobile:
email: