JEFFERSON TOWNSHIP

Butler County, PA

INSTRUCTIONS FOR OBTAINING TOWNSHIP REVIEW CERTIFICATE and/or BUILDING PERMIT

APPLICATION <u>MUST BE MADE and SIGNED BY THE PROPERTY OWNER(S)</u>. APPLICANT IS RESPONSIBLE FOR ACCURACY OF PROPERTY LOT LINES, LOCATION OF BUILDINGS, AND SEPTIC SYSTEM OR LINES, ETC. IF NECESSARY, PROPERTY BOUNDARIES SHOULD BE SURVEYED PRIOR TO APPLICATION.

- 1. Complete and/or obtain the following for submission:
 - a. Complete Application Package
 - 1. FOLLOW "Construction Permit Instructions" pg.5
 - 2. Attach or mail required submissions listed in "Construction Drawings Requirements" pg. 6
 - b. Attach Driveway Permit (either Township or PA Dept. of Transportation)
 - c. Attach "On-Lot" Septic Permit or "Public" Sewage & Water Authorization
- 2. When complete, return the above (A,B,C) to: Jefferson Township

157 Great Belt Rd. Butler, Pa 16002-9026

3. The Building Permit Officer will <u>review</u> your application and <u>inspect</u> the building location (site) to verify compliance with Township land development, building set-backs, driveway construction, sewage ordinances and other related regulations. Then, your application will be submitted to Code.sys Code Consulting, Inc. (BCO & Inspectors) and you will be notified if additional information is needed; of building permit approval or denial; the permit fee and available times to pick-up the permit. New buildings, adding to or renovating existing buildings, changing the use of an existing structure/building, and demolition of an existing structure <u>ALL require permits</u>. Multi-Family/Commercial/Institutional/Industrial <u>ALL require certified professional and more detailed submissions</u> including a land development application. See page 2, 5 + 6.

The building permit fee will be due upon issuance of the building/construction permit or review certificate. (Make this check payable to: Jefferson Township)

EXCEPTION: A detached accessory structure (garage, shed, carport, green house) that meets the guidelines for UCC inspections exemption (i.e. under 1,000 sq. ft. on a "single family" residential lot - no electric/no plumbing/no gas hook-up/not in a floodplain.) In this case, ONLY the <u>Township Review Certificate</u> is required for a small fee.

WARNING ! DO NOT BEGIN CONSTRUCTION BEFORE A PERMIT IS ISSUED Construction begun before permit is officially given out is cause for the issue of a Commonwealth of Pennsylvania Non-Traffic Citation.

Conviction of a violation of this provision of the Building Permit Ordinance carries a fine. Each day the violation continues is considered a separate offense.

Township PERMITS OFFICERLeo Rosenbauer, 724-352-2324And for driveway permits onto township roadLeo Rosenbauer, 724-352-2324****for permit onto a state road you MUST contact Leo Rosenbauer before contacting:**the PA Dept. of Transportation Dist.10, Indiana, PA724-357-2898Township Sewage EnforcementDoug Duncan, Primary 724-679-4860Township SecretaryLois Fennell (Twp. office) 724-352-2324 (FAX 352-8850)Code.sys, Inc. (Dave McGuigan, Inspector & BCO under PAUCC)1-877-821-0337 ext.#24

RESIDENTIAL:

1. Lots served by a Public sewer & water system are required to be One-Half $(\frac{1}{2})$ acre or more in size.

2. Lots NOT served by a Public sewer and water must be One and One-Half $(1 \frac{1}{2})$ acres or more in size. Front Setbacks:

All structures must be FIFTY (50) Feet from the edge of any road, easement, or existing cartway prepared for vehicular use at the FRONT of the property.

Side and Rear Setbacks:

All structures must be TWENTY-FIVE (25) Feet from property lines and/or right-of- way, easement, or cartway at the SIDE or REAR of the property.

COMMERCIAL:

- 1. Commercial lots served by private water (well) and on-lot septic must be 1¹/₂ acre or more.
- 2. Commercial lots served by public water AND sewer must be at least 1 acre.

3. Multi-Family must be served by public water & sewer and must be located on a public road. Front Setbacks:

All structures must be SEVENTY-FIVE (75) Feet from the edge of the right-of-way at the FRONT of the property.

Side and Rear Setbacks:

All structures must be FORTY (40) Feet from the property lines and/or right-of-way, easement, or cartway at the SIDE of the property and SIXTY (60) Feet at the REAR of the property.

SOIL DISTURBANCE:

Disturbing more than one (1) acre of ground requires permitting. Contact the Butler County Conservation District at 724-284-5270.

LAND DEVELOPMENT REQUIREMENTS:

If you plan to make improvements to your lot which is used for OTHER THAN A RESIDENTIAL single family dwelling, duplex or out-building, your 'improvements' are considered "land development." (See Land Development definition -Municipalities Planning Code, Article I, Section 107 and Chapter 22, Part 3, Jefferson Township Code of Ordinances; obtain a SUBDIVISION/LAND DEVELOPMENT APPLICATION from the Township Office). Land Development drawings submitted are reviewed (with few exceptions) by the township engineer or other professional, the cost of which is the responsibility of the land owner/developer. As a condition of acceptance, performance bonds may be required for determined improvements (Chap. 22, Part 10, Jefferson Township Code of Ordinances.)

"Improvements" include, but are not limited to: grading, paving, parking areas, curbs, gutters, storm sewers and drains, improvements to existing watercourses, sidewalks, crosswalks, street signs, monuments, water supply facilities, sewage disposal facilities, and storm water control facilities. (Chap. 22, Part 9, Jefferson Township Code)

This Application for a building permit if used for any non-residential structure must be accompanied by 3 sets of certified professional architectural plans. You, as the developer MUST submit these drawings directly to the PA UCC Plan Reviewer (currently Code.sys Code Consulting...see page 6.) Permits (septic or building) for such non-residential structures CANNOT be issued until the Land Development has been submitted, reviewed and approved by the Township.

ORDINANCES/CODE:

A copy of the Subdivision and Land Development Ordinance and related ordinances is available from the Township for a nominal fee. A copy of the Uniform Construction Code can be obtained by contacting the following: www.dli.state.pa.us 717-787-3806, "1", "9"

DEMOLITIONS or RENOVATIONS:

Owners and operators of structures other than residential with 4 or less 'units' to be renovated or demolished MUST meet state and federal ASBESTOS requirements (in addition to PA UCC requirements). It is the responsibility of the property owner to contact DEP: 814-332-6940 or www.state.pa.us – select "search" and click the word "asbestos". A permit is still required under the PA UCC! In any case, building permit applications should be submitted to the township for 'all' demolitions or renovations. ALSO, renovations (specifically change of use of building) and demolitions are subject to review by the sewage enforcement officer (agency). In regards to demolitions, if abandoned AND no replacement building is planned, we recommend that wells be capped and septic systems be pumped and filled in. -2-

JEFFERSON TOWNSHIP

Butler County, PA TOWNSHIP REVIEW CERTIFICATION and/or BUILDING PERMIT APPLICATION INFORMATION

) PERMIT LOCATION		
(NUMBER & S		CITY, STATE, ZIP
LOT NUMBER	_ SUBDIVISION (Name of Plan of	Lots)
) DIRECTIONS (from poor ost interso	ction)	
.) DIRECTIONS (nom hearest interse		
3) APPLICANT	4) CONTRACTOR	INFORMATION
(Current name & address of property o	wners)	
	NAME OF COMPAN	Y & Registration Number
FIRST NAME MI LAST		
	CONTACT INDIVIDU	UAL
STREET ADDRESS	STREET ADDRESS	
CITY, STATE & ZIP	SIREEI ADDRESS	
	CITY, STATE & ZIP	
TELEPHONE	Telephone #	
	· · · · · · · · · · · · · · · · · · ·	
5) TYPE OF PERMIT	6) PROPOSED USE	7) CATEGORY
New Building	÷ ;	Single-family/Residential
Addition	i	Other/Residential
Alteration	Multi-Family	Church
Repair-Replacement	Garage/Carport (Circle 1)	Commercial
Demolition (Wrecking)	Barn	Industrial
Mobile Home Transfer/Relocation	Pool (above/in ground) (Circle 1)	
Foundation	Porch/Deck (Circle 1)	School
Temporary/Hardship		
Other:(yes or no)	Other:	Other:
PROVIDE A BRIEF DESCRIPTION ()F PROIFCT:	
	i i Rojile i.	
BUILDING CHARACTERISTICS		
Brick-Stone-Block	A. Basic cost \$	
Wood Frame		00 (complete application 9B-
Structural Steel		<u>IF NOT: MUST complete</u>
Reinforced concrete	<u>"Affidavit of Exemption" before</u>	
Other: Mobile Home Ser. No	6	00 (complete application 9C-
	D. Heating/AC E. Other	00 (complete application 9D-
	TOTAL COST \$	
	101AL COST \$	00
0) NUMBER OF ROOMS	11) SEWAGE DISPOSAL	12) WATER SUPPLY
Bedrooms	Public	Public
Full Bathrooms	Private	Private
Half Baths	Septic Permit #	
	~~p~~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	

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JEFFERSON TOWNSHIP

TOWNSHIP REVIEW CERTIFICATION and/or BUILDING PERMIT APPLICATION INFORMATION

13) BUILDING SETBACKS (enter for Ft. from Road/Street (Reside Ft. from Right-of-way (Com Ft. from left side Ft. from right side Ft. from rear Acreage total or lot size	ential)	DIMENSIONS (of st. Aft. B. Number of stories C. Living space (incl. D. Garage (if unattac E. Basement sq. ft. F. TOTAL square foot G. Decks/Porches only (ir	X garage if attached hed) sq. ft. age under constr	ft.	
15) TYPE OF HEATING Gas Oil Electric Coal Other:		16) TYPE OF ME Central Elevator Special	Air Condition		
17) OTHER STRUCTURES ON PRO House Mobile Home Barn In ground Pool Shed No other Structures on Proper Other:	erty ne new squa	PLUS 14) F *** Total ** <u>Impervious Surfac</u> infiltration of water in patios, garages, sheds including gravel or cr are footage entered in 14) F a	Q.FT. of <u>Impe</u> other than buil above <u>ee</u> (Area) - surface nto the ground (if s, parking or driv rushed stone or p	ervious surfac dings (old & g ce that prevents i.e. roofs, addit geway areas, sic pavement areas e than 5,000 sq.	e (<i>see</i> proposed) s the ions, dewalks .) ft. you MUST
complete Page 13 (Small Project Stormwater Mana ** Agricultural activities may be exempt per C	igement Appl hap. 26-302 -	lication (Chap. 26/Appendix E - #8 please discuss possibl	Jefferson Towns e exemption with	hip Storm Water the permits office	Ordinance.) er.
 18) NUMBER OF PARKING SPACES Off Street Enclosed Outdoors 		/EWAY PERMIT State Road Township Road Private Lane isting/New) (Circle 1)	20) OWN	IERSHIP Private Public Corporate/Co /Company Nan	
THE UNDERSIGNED ATTH IS TRUE AND ACCU				D ABOVE	
Signature of APPLICANT	DATE	Signature of CO-A	APPLICANT	DATE	
(print)		(print)			-4-

CONSTRUCTION PERMIT INSTRUCTIONS

ALL INFORMATION IS REQUIRED UNDER THE COMMONWEALTH OF PENNSYLVANIA UNIFORM CONSTRUCTION CODE, ACT #45 OF 1999.

- 1. Construction permit application(s) are to be completed, signed by property owner and dated.
- Two (2) sets of building plans and/or specifications (if required) are to be submitted with the application for residential construction projects. Three (3) sets of <u>certified professional building plans and/or specifications</u> are to be submitted with the application for commercial (or other non- residential) construction projects. - (page 6)
- 3. If applicable, a site plan/survey shall be submitted with the application. For Township Review Permits a SIGNED "bird's eye view" plot plan drawing should be submitted (pg 7)
- 4. Sign OSHA Safety Standards sign-off form. (page 8)
- 5. Complete the Energy Code Compliance form. (page 9)
- 6. The Municipality MUST sign-off on the Flood Plain, Zoning, and Historic District 'sign-off' form. (Please **complete the top portion**). (page 10)
- 7. Provide proof of Workers' Compensation Insurance (page 11) or complete the "Affidavit of Exemption". (page 12)
- 8. Affidavit of Exemption (If applicable) for Workmen's Comp. Insurance, Contractor Registration Number, or Electric.) (page 12)
- NOTE: This list is not all inclusive and the Municipality reserves the right to add, delete, and change this requirement list at any time. Additional information may be required by the Municipality in order to approve and issue a permit.

Your permit application will be processed within 5 to 7 working days, once it is deemed complete. You will be notified of all applicable fees at that time. Once the permit fees are paid, you will be given the Permit Placard(s) that is (are) to be placed in the window at the construction site and a list of all required inspections with the names and phone numbers of the inspector(s).

CONSTRUCTION DRAWINGS REQUIREMENTS

Drawings should be drawn to scale and shall provide the necessary information to verify compliance with the Pennsylvania Uniform Construction Code.

<u>Two (2) sets</u> of building plans and/or specifications shall be submitted for <u>residential</u> <u>construction projects</u>. **Three (3) sets** of <u>certified professional building plans and/or specifications</u> shall be submitted with the application* for **commercial (or other non-residential) construction projects**. All construction drawings shall include the following information:

-Site Plan Drawing: The construction documents submitted with the application for permit shall be accompanied by a site plan showing the size and location of new construction and existing structures on the site and distances from lot lines. In the case of demolition, the site plan shall show construction to be demolished and the location and size of the existing structures and construction that are to remain on the site or plot.

-Structural Drawings: To include footing construction detail, foundation construction details, framing construction detail, masonry construction detail, wood construction detail, steel construction detail, stair detail and chimney detail as apply.

-Foundation Drawings: To include all applicable dimensions including footing sizes with description of reinforcement (if applicable), layout and description of foundation drain system, and location of all slabs describing thickness of slab, base, reinforcement, vapor barrier and any slopes.

-Floor Plans: To include location and sizes of all doors, windows, closets, decks, and plumbing fixtures; wall and column sizes - thickness and material; and location and type of insulation. To include the use of all areas and means of egress components.

-Roof Framing Drawings: To include size, type, location and anchoring of roof trusses. NOTE: for "preengineered" trusses, floor joists and beams, all specifications, bracing and installation instructions must be available at time of inspection.

-Floor Framing Drawings: To include same as above (copy in correct information from above), except for floor joists on each floor!

-Electrical Drawings: To include all lighting facilities, smoke detectors, GFI and ARC fault protection, outlet box size, electrically operated equipment and electrical circuits required for all service equipment of the building or structure.

-Mechanical Drawings: To include size and type of appliances, construction of flues and chimney system, ventilation air provided, fresh air make-up provided and gas shut-off locations.

-Plumbing Drawings: To include a plan view and a riser diagram of waste and water piping, pipe sizing, grade of pipe, drainage fixture unit loads on stacks and drains, and water distribution design criteria.

▶ It is the responsibility of the Owner/Developer/Applicant to send the three sets of certified professional architectural drawings to the 'plan reviewer' for anything other than a single family dwelling or duplex...currently Code.sys Code Consulting, Inc., Attn: Peg, 321 Grant St., Pittsburgh, PA 15209. Otherwise additional fees from the township will be applicable.

JEFFERSON TOWNSHIP BUTLER, PA { REQUIRED - Plot Plan }

BE SURE to double check your building and set-back dimensions BEFORE construction begins to avoid problems with non-compliance 'after' construction (i.e. footer/basement or any other) has been started!!!

REQUIRED INFORMATION CHECK LIST

•			
	Lot Shape		
	Lot Dimensions	Construction Location:	
	Building Location	Drawing Completed by:	
	Driveway Location	Address:	
	Distances to property lines		
	Water Supply		
	Sewage/Septic Location	REQUIRED Signature	
	Road/Street Name	(Property Owner)	Date Completed:

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OSHA SAFETY STANDARDS SIGN-OFF

LOCATION OF PROPERTY:

(LOT # AND STREET NAME or Street Address)

MAP & PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: ____

I AM FULLY AWARE OF THE U.S. DEPARTMENT OF LABOR, OCCUPATION SAFETY AND HEALTH ADMINISTRATION (OSHA) STANDARDS AND UNDERSTAND THAT I MUST COMPLY WITH THESE STANDARDS FOR THE DURATION OF MY CONSTRUCTION PROJECT.

(SIGNATURE OF APPLICANT/OWNER)

(DATE SIGNED)

ENERGY CODE COMPLIANCE

LOCATION OF PROPERTY: ____

(LOT # <u>AND</u> STREET NAME or Street Address)

TAX MAP & PARCEL NUMBER: _____

MUNICIPALITY: _____ COUNTY: _____

Important: Section N1102.4 of the 2015 International Residential Code requires that: An Air Leakage Test is performed by an approved third party testing and verifying that the building has an air leakage rate of not exceeding 5* air changes per hour. (*as amended by PA-UCC)

 REScheck
 ATTACH COMPLIANCE CERTIFICATE

REScheck SOFTWARE CAN BE OBTAINED AT: www.energy/codes.gov

NOTE: Section N1101.14 of the 2015 International Residential Code requires that: A permanent certificate shall be posted on a wall where the furnace is located. The certificate shall be completed by the builder or registered design professional. The certificate shall list the predominate R-values of insulation installed in or on ceiling/roof, walls, foundation (slab, basement wall, crawlspace wall and/or floor) and ducts outside conditioned spaces; U-factors for fenestration; and the solar heat gain coefficient (SHGC) of fenestration.

□ SIMPLIFIED PRESCRIPTIVE BUILDING ENVELOPE THERMAL COMPONENT CRITERIA

CLIMATE ZONE 5 REQUIREMENTS

FENESTRATION - (WINDOWS)	U-0.32	SKYLIGHTS	U-0.55
CEILING	R-49	WOOD FRAME WALLS	R-20 OR R-13 & R-5h
MASS WALLS	R-13/17	FLOORS	R-30g
BASEMENTS	R-15/19c	SLABS	R-10 – 2' d
CRAWLSPACES	R-15/19c		

c. 15/19 means R-15 continuous insulation on the interior or exterior of the home or R-19 cavity insulation at the interior of the basement wall. 15/19 shall be permitted to be met with R-13 cavity insulation on the exterior of the basement all plus R-5 continuous insulation on the interior or exterior of the home.

d. R-5 shall be added to the required slab edge R-values for heated slabs. Insulation depth shall be the depth of the footing or 2 feet, whichever is less in Zones 1 through 3 for heated slabs.

g. Or insulation sufficient to fill y=the framing cavity, R-19 minimum

h. The first value is cavity insulation, the second value is continuous insulation, so "13+5" means R-13 cavity insulation plus R-5 continuous insulation.

SIGN ENERGY COMPLIANCE FORM

My signature below, as owner or contracted	or on behalf of owner, fo	or this building permit, constitutes that I will	
comply with the energy code as outlined in	n the REScheck certificat	te or the climate zone checked above.	
Sign:	Print Name	Date	-9-

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	FLOOD PLAIN	, ZONING.	and HISTORIC	DISTRICT	SIGN-OFF
--	-------------	-----------	--------------	----------	-----------------

LO	CATION	OF PROPERTY	:				_
			(Site Addres	s LOT # AND ST	REE	T NAME or Street Address)	
MA	P & PARO	CEL NUMBER:					_
MUN	NICIPALI	ТҮ:		(COU	UNTY:	_
	OWNER N	AME:					
	ADDRESS	:					
	CITY:		S'I	'ATE:		ZIP:	
	PHONE:	()					
	APPLICA	NT NAME (if not o	owner):				
	APPLICA	NT'S ADDRESS:					
	CITY:		ST	ATE:		ZIP:	
	PHONE:	()					
	REQUIRED AS WELL A SEWER AN	S COMPLIANCE W D WATER AUTHOR	02 OF THE ITH THE R ITY WHET	STATE HIGHV EQUIREMENT THER SPECIFII	WAY S OI ED C	Y LAW (36 P.S.§ 670-42 F THE MUNICIPAL	
	DDPLAIN S	·				DOES NOT APPLY	
HIST		STRICT SIGN-OF L COMMENTS:	F 🗆	APPROVED		DOES NOT APPLY	
ZONI	ING SIGN-C ADDITIONA)FF L COMMENTS:		APPROVED		DOES NOT APPLY	
BY:	SIGNATUI PRINT NA					2	
		JMER: ()		D		E:	

WORKER'S COMPENSATION INSURANCE COVERAGE LIABILITY INSURANCE COVERAGE and CONTRACTOR'S REGISTRATION INFORMATION

(General Contractors MUST complete & Sign and supply information for all sub-contractors.)

A.	Insurance Information: (Insurance Certificates may be submitted in lieu of completion.)
	Name of Property Owner
	Name of Contractor/Developer
	Federal or State Employer I.D. Number
	Applicant is a qualified self-insurer for worker's compensation: Yes No
	Name of Worker's Compensation Insurer
	Worker's Compensation Insurance Policy Number
	W/C Ins. Policy Expiration Date
	Name of Liability Insurance Carrier/Company
	Liability Insurance Policy Number
	Liability Ins. Policy Expiration Date

B. PA STATE "Contractors Registration Number" ______ as required by the Home Improvement Consumer Protection Act 132 of 2008, effective 7/1/09 - www.attorneygeneral.gov

(You may attach copy of certificate from the Office of the Attorney General.

Contractor 'doing business as' (please print):

(Contractor please sign.)_____

<u>Complete information below if the Contractor is 'exempt'</u> from being registered under the Pennsylvania "Home Improvement Consumer Protection Act 132 of 2008" (contractor's registration law):

_____ due to my income for performing home improvements being less than \$5,000 per year; or _____ other (explain)______

C. Affidavit of Exemption: Required if workmens compensation coverage (see A above) is not applicable. (See and use form on page 12 of Building Permit Application, #1)

ATTENTION: You are required to have your signature notarized.

1) Affidavit of Exemption from Workers' Compensation Insurance: (*If applicable*) The undersigned affirms that he/she is not required to provide worker's compensation insurance under the provisions of the Pennsylvania Worker's Compensation Law for one of the following reasons, as indicated:

<u>Property owner is performing own work</u>. If property owner later hires a a contractor to perform any work pursuant to building, the owner <u>must</u> have the contractor provide proof of worker's compensation insurance to the municipality. The property owner assumes liability for the contractor's compliance with this requirement. (In this case the property owner's signature must be notarized.)

<u>Contractor has no employees</u>. The contractor is prohibited by law from employing any individual(s) to perform work pursuant to this building permit unless the contractor provides proof of insurance to the municipality. *(Contractor's notarized signature is needed.)*

<u>Religious exemption under the Worker's Compensation Law</u>. All employees of the contractor are exempt from worker's compensation insurance (*attach copies of religious exemption letters for all employees – ref: 304.2 of PA Law*. (*Contractor's signature must be notarized*.)

2) **Affidavit of Exemption from Residential Electrical Inspection**: (*IF applicable*)

Furthermore, I hereby acknowledge that should I decide to install electric in said structure at a later date, I must contact the township inspector for an electrical inspection according to the PA Uniform Construction Code adopted by Jefferson Township. *(In this case the property owner' signature must be notarized.)*

*Signature of Property Owner or Contractor (as implied/checked above)

COMMONWEALTH OF PENNSYLVANI	•
COUNTY OF BUTLER	} SS: }
On thisday of,	, before me the undersigned officer,
personally appeared, to be the person whose name is subscribed t that he executed the same for the purposes IN WITNESS WHEREOF, I hereunto set b	to the within instrument and acknowledged herein contained.
SEAL	
	Notary Public

* Copy this form to accommodate quantity of signatures needed (*i.e.* if both the Owner + Contractor need to sign.) * Original signatures to be provided to the Township.

STORMWATER MANAGMENT Chap. 26 Attachment 5 **Township of Jefferson** Appendix E Small Project Stormwater Management Application

Per Jefferson Township's Act 167 Stormwater Management Ordinance, an Applicant is required to submit this Small Project Application whenever Regulated Activities involving the creation of new impervious surfaces equal to, or greater than 2,500 square feet and less than 5,000 square feet. Impervious surfaces are areas that prevent the infiltration of water into the ground and shall include, but not be limited to, roofs, patios, garages, storage sheds and similar structures, and any new streets or sidewalks.

To Calcula	te Impervious	Surfaces	Please Com	plete	This Table
Surface Type	Length (feet)	x	Width (feet)	=	Proposed Impervious Area
Building		х		=	
(area per downspout)		х		=	
		x		=	
		х		=	
Driveway		x		=	
		х		=	
		х		=	
Parking Areas		х		=	
		x		=	
		х		=	
Patios/Walks		X		=	
		x		=	
		х		=	
		х		=	
Other		х		=	
		X		=	
		X		=	
Total Impervious S	urface Area to	be mar	aged (sum c	of all	
			are	eas)	

For all Regulated Activities that involve creation of new impervious surface areas EQUAL TO or GREATER than 5,000 square feet, the Applicant MUST submit a Stormwater Management Site Plan and Report as defined in Article VIII of the Ordinance and implement volume and rate controls.

If the Total Impervious Surface Area is LESS THAN 5,000 square feet, or the proposed development is a Single Family Residential Activity implementing the minimum measures in Section 302.E. read, acknowledge and sign below.

Based upon information you have provided, a Stormwater Management Site Plan and Report **IS NOT** required for this Regulated Activity. Jefferson Township may request additional information and/or a SWM Site Plan for any reason.

Applicant or Property Owner certifies that Sections 302.A., 302.B., and 302.C. have been adequately addressed and acknowledges that submission of inaccurate information may result in a stop work order or permit revocation. Acknowledgement of such is by signature below. I declare that I am the Owner or Owner's legal representative. I further acknowledge that the information provided is accurate and employees of Jefferson Township are granted access to the above described property for review and inspection as they deem necessary.

Owner Date: _____

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Check here if Contractor is SAME AS BUILDER on page 1 of Building Permit Application Otherwise complete: CONTRACTOR: Address: City: City: Phone: Fax: TYPE OF ELECTRICAL WORK: New Replacement Repair/Alterations UTILITY COMPANY: WORK ORDER NUMBER:					ELECTRICAL PERMIT 9B-a				
Otherwise complete: CONTRACTOR:	*****	******							
Address:			lication	ermit App	ER on page 1 of Building F	BUILDE			
City:								wise complete: CON	Otherv
Phone: Fax: TYPE OF ELECTRICAL WORK: New Replacement Repair/Alterations UTILITY COMPANY:							Address		
TYPE OF ELECTRICAL WORK: New Replacement Repair/Alterations UTILITY COMPANY:									
				Fax:	<u>-</u>		Phone:		
		ns	/Alteratio	Repair	Replacement	_	New	OF ELECTRICAL WORK:	TYPE O
								UTILITY COMPANY:	
DESCRIPTION OF CONSTRUCTION:)N:	RIPTION OF CONSTRUCTION	DESCR
ESTIMATED COST OF ELECTRICAL WORK: \$							AL WORK: \$	ATED COST OF ELECTRIC	ESTIM
NO. EQUIPMENT NO. SIZE EQUIPMENT NO. SIZE EQUIPMENT		•	SIZE	NO.		IZE	NO.		NO.
Luminaries AMP Service Panel KW Electric Range Reception AMP Service Panel AMP Service	ptacle								
Receptacles AMP Sub-Panels KW Oven/Surface Unit		•						•	
Switches AMP Sub-Panels KW Electric Water Heater	er								
Detectors KW Dishwasher HP/KW Space Heater									
Pole Luminaries HP Garbage Disposal KW Electric Dryer Recep	itacle								
Spa/Hot Tub KW Central A/C Unit DW Baseboard Heat		DW Baseboard Heat			KW Central A/C Unit			Spa/Hot Tub	
Swimming Pool Above GroundOR In-Ground								0.1	
Other: Other:								Oth	
Other:									
Other:								Other.	
I hereby certify that the above information is true and correct and acknowledge the smoke detector requirements involv	und	tor roquiromonts involu	aka dataa	ao tho cm	and correct and acknowled	truc a	formation	by cortify that the above is	Ibarah
	eu		oke delet	ye the shi	ind correct and acknowled	li ue ui	-		
with alteration, repair and addition permits:							ion permits	itteration, repair and daan	with ai
APPLICANT/AGENT SIGNATURE PRINT NAME DATE		DATE			PRINT NAME		URE	APPLICANT/AGENT SIGNAT	A
****** FOR DEPARTMENT USE ONLY *****				Y *****	R DEPARTMENT USE ONI	** FOF	***		
Electrical Permit Application: Approved Denied BUILDING PERMIT NO		IIT NO	NG PERM					ical Permit Application:	Electri
Date: BY:	_								

Date:_____ Reason(s) for Denial:_____

PLUMBING PERMIT 9C-a

	wise complete: CONTRA		5:		
		City:			
		-			Fax:
.UM	BING SYSTEM:				Alterations
	TYPE	Public S	ewer	Private Septic _	
	ТҮРЕ	Public V	Vater	Private Well	
STIN	ATED COST OF PLUMBING V	NORK: \$	·		
<u>0.</u>	<u>FIXTURE</u>	<u>NO.</u>	FIXTURE	<u>NO.</u>	FIXTURE
<u>0.</u>	<u>FIXTURE</u> Water Closet	<u>NO.</u>	<u>FIXTURE</u> Urinal/Bidet	<u>NO.</u>	<u>FIXTURE</u> Bath Tub
<u>0.</u>		<u>NO.</u>		<u>NO.</u>	
	Water Closet Lavatory Sink		Urinal/Bidet Shower Dishwasher	<u>NO.</u>	Bath Tub
	Water Closet Lavatory Sink Washing Machine		Urinal/Bidet Shower	<u>NO.</u> 	Bath Tub Floor Drain Drinking Fountain Water Heater
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping	<u>NO.</u> 	Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping Steam Boiler		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping Sewer Pump	<u>NO.</u> 	Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler Interceptor/Separator
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping Steam Boiler Backflow Preventer		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping Sewer Pump Greasetrap	<u>NO.</u>	Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping Steam Boiler Backflow Preventer Water Service Connection		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping Sewer Pump Greasetrap Stacks		Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler Interceptor/Separator Sewer Connection
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping Steam Boiler Backflow Preventer Water Service Connection Other		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping Sewer Pump Greasetrap Stacks		Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler Interceptor/Separator Sewer Connection
	Water Closet Lavatory Sink Washing Machine Fuel Oil Piping Steam Boiler Backflow Preventer Water Service Connection		Urinal/Bidet Shower Dishwasher Hose Blbb Gas Piping Sewer Pump Greasetrap Stacks		Bath Tub Floor Drain Drinking Fountain Water Heater Hot Water Boiler Interceptor/Separator Sewer Connection

APPLICANT/AGENT SIGNATURE		PRINT NAME	DATE
	****** FO	R DEPARTMENT USE ONL	Y *****
Plumbing Permit Application: Approved		Denied	BUILDING PERMIT NO.
Date:		BY:	
Reason(s) for Denial:			

			MECHANICAL			
					******	*****
Check here	if Cont	ractor is SAME AS E	BUILDER on page 1	of Building Pe	rmit Application	
Otherwise	complete:					
		City: _				
		Phone: _	Phone: Fax:			
HEATING S	YSTEM:	New	R	eplacement	Electric	Solar
FL	JEL	Gas	_ 0	il		
TY	ΈE	Hydronic			_	
DESCRIPTIO	ON OF CONSTRU	JCTION:				
ESTIMATE	O COST OF MEC	HANICAL WORK: 💲	5			
NO.	EQUIPMENT	NO.	EQUIPMENT	NO.	EQUIPMENT	
	Water Heater		Fuel Oil Piping		Gas Piping	
	Steam Boiler		Hot Water Boiler		Hot Air Furnace	
	Oil Tank		LPG Tank		Fireplace	
	Other					
	• ·	ove information is addition permits:	true and correct ar	nd acknowledg	e the smoke detector rea	quirements involved
APPLICANT/AGENT SIGNATURE		PRINT NAME			DATE	
			** FOR DEPARTME			
Mechanical Permit Application: Approved				Denied		「NO
				ВҮ:		
Reason(s) f	for Denial:					