EAST COCALICO TOWNSHIP

RESIDENTIAL BUILDING PERMIT DATA INFORMATION PACKET FOR ONE- AND TWO-FAMILY DWELLINGS

EVERYTHING IN THIS PACKET IS IMPORTANT.
READ EVERYTHING THAT IS IN THIS PACKET
CAREFULLY AND COMPLETELY.
READ IT BEFORE YOU FILL OUT THE
PERMIT APPLICATION.

EVERYTHING THAT IS IN THIS PERMIT DATA INFORMATION PACKET MUST BE RETURNED TO THE MUNICIPALITY WITH THE COMPLETED APPLICATION.

THIS IS AN ORIGINAL APPLICATION.
ONCE YOU SUBMIT IT (AND ANYTHING ELSE REQUIRED TO BE SUBMITTED ALONG WITH IT TO THE MUNICIPALITY) IT WILL NOT BE RETURNED TO YOU. THEREFORE, YOU ARE ADVISED TO MAKE A COPY OF THIS APPLICATION ONCE YOU HAVE COMPLETED IT AND KEEP A COPY FOR YOUR RECORDS.

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REQUIREMENTS FOR OBTAINING A BUILDING PERMIT

(A 15-business day review period is permitted by State Code)

Listed below are the items that are required to be submitted to East Cocalico Township in order for you to obtain a building permit. Failure to submit the required items may result in a denial of the issuance of the permit. The required applications are attached.

- 1) The Building Permit Application must be made either by the Owner(s) or Lessee of the building or structure, or an agent of either, or by the Registered Design Professional employed in connection with the proposed work.
- 2) All applications must be accompanied by three (3) sets of site plans.
- 3) All applications must be accompanied by three (3) sets of construction documents.
- 4) It is recommended but not required that a Registered Design Professional prepare the construction documents. The documentation shall include the name and address of the Registered Design Professional and shall be signed, dated and sealed.
- 5) If the application is for a new home requiring an on-lot septic system, a copy of the septic system permit must be submitted.
- 6) If an addition including bedrooms is to be constructed, the sewage enforcement officer must check the plans to verify that an adequate septic system is available. Verification must accompany the application.
- 7) If this application is for a new home and municipal water and/or sewer connection will be made, a copy of the issued permit or receipt is required prior to a building permit being issued.
- 8) If this application is for a new home a driveway permit is required.
- 9) A Soil Erosion & Sedimentation Control Plan must be submitted to Lancaster County Conservation District. A copy of the approval letter or the letter of exemption must be submitted with the building permit application.
- **10)** A completed Workers Compensation Form
- 11) NO WORK SHALL BEGIN UNTIL A BUILDING PERMIT HAS BEEN ISSUED.

If you have any questions, please call Tommy Ryan at (717) 336-1710.

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THE FOLLOWING PLANS SHALL BE SUBMITTED IN TRIPLICATE ALONG WITH THE BUILDING PERMIT APPLICATION

All applications must be accompanied by three (3) sets of site plans.

1) SITE PLAN

All Applicants shall submit a Site Plan drawn to scale, and the Site Plan shall contain at minimum the following information:

- a) Lot dimensions, including all dimensions of all existing and proposed structures
- b) Building location on lot and setbacks
- c) Street or highway right-of-ways and any other easements or right-of-ways
- d) Existing or proposed septic & well locations
- e) Existing or proposed driveway location with percentage of slope (or grade) of lot

THE FOLLOWING PLANS SHALL BE DRAWN ON A SCALE OF ONE-QUARTER INCH (1/4") = ONE FOOT (1'). ALL PLANS SHALL SUBMITTED IN TRIPLICATE.

All applications must be accompanied by three (3) sets of construction documents.

2) **ELEVATION PLANS**

Elevation Plans of the front, back, and both sides of the structure shall be submitted and shall, at minimum, show the following (from the finished grade):

- a) Floor lines with dimensions, and dimensions from grade to peak.
- **b)** Overhangs or porches (with dimensions and materials).
- c) Exterior coverings and materials.
- d) Roof materials and roof slope including stamped and signed truss drawing.
- **e)** Chimney size, chimney material, and location of chimney above ridge line and from nearest wall.

3) FOUNDATION PLAN

- a) Basement crawl spaces and slabs.
- **b)** Footings to include depth size, width and rebar if any.
- c) Foundation material and sizes with window and door sizes and locations. Wall steel
- d) Structural members, and their sizes and types.
- e) Stairs and their sizes and types.
- **f)** Interior and exterior dimensions.
- g) Emergency escape and rescue window, outside entrance location or equivalent.
- h) Louvers and vents (with sizes).

4) FLOOR PLANS

- a) First, second and third (if applicable) floors with all dimensions.
- b) Structural framing members, and their sizes, directions and spacing.
- c) Stairs, stairways and stairwells, including dimensions handrails.
- **d)** A window and door schedule showing the manufacturer, insulation u-factor, model, sizes and locations for each. (Bedroom windows must meet egress requirements (attach manufacturers specifications)
- **e)** An Energy Conservation Code compliance certificate or equivalent must be submitted with all applications for new construction.

f) Plumbing drawings:

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- 1) Provide a ladder diagram showing drainage and vent piping sizes.
- 2) Provide a list of materials to be used.
- 3) If a residential fire sprinkler system is being installed:
 - a) Provide information on the system to be utilized NFPA 13R, 130 or 2009 IRC.
 - **b)** Provide cut sheets of materials to be used (sprinkler heads, piping, etc.)
 - c) Provide details of sizing calculations for the system.
 - d) Provide plans showing a layout of the piping, including sizes, sprinkler head locations.
- g) Mechanical drawings:
 - 1) Provide heating and cooling load calculations.
 - 2) Provide cut sheets of equipment to be installed and R-valve for dock.
 - 3) For gas and oil heating systems:
 - a) Provide details on combustion air and venting.
 - 4) Provide a sketch of the HVAC system with run sizes and locations of outlets.
 - 5) If gas fire places and pellet/wood stoves will be installed:
 - **a)** Provide cuts sheets including venting requirements and information on clearance from combustibles.
 - h) Electrical drawings/Duct testing:
 - 1) Provide the electrical service location, lateral or overhead, amperage size, grounding method & equipment cut sheets.
 - 2) Provide a panel schedule identifying branch circuits, overcurrent protection ratings, AFCI protection & GFCI protection and tamper resistant.
 - 3) Provide smoke and carbon monoxide detector locations.
 - 4) Outlet & switch locations on plans. Smoke detector required if over 500sf area.

5) CROSS SECTION

- a) Building or wall cross sections.
- b) Footer and foundation type and details.
- c) Framing details with floor-to-floor height.
- d) Roof construction and all material used throughout.
- **e)** Section through chimneys and/or fireplaces showing damper(s), smoke chamber, throat, flue(s), clean out and mantle.

FOR RESIDENTIAL CONSTRUCTION, IT IS STRONGLY RECOMMENDED
THAT ALL OF THE PLANS LISTED ON THESE PAGES BE PREPARED
BY A REGISTERED DESIGN PROFESSIONAL.

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INSPECTIONS REQUIRED DURING THE STAGES OF CONSTRUCTION

THE ISSUANCE OF THE BUILDING PERMIT FOR WHICH YOU HAVE APPLIED REQUIRES YOU TO COMPLY WITH ALL PROVISIONS OF ALL CODES APPLICABLE TO BOTH CONSTRUCTION AND CONSTRUCTION INSPECTIONS. FOLLOWING ARE THE STAGES OF CONSTRUCTION WHEN THE CODE ENFORCEMENT OFFICER MUST BE NOTIFIED. INSPECTIONS MUST BE SCHEDULED A MINIMUM OF TWENTY-FOUR (24) HOURS IN ADVANCE UNLESS OTHERWISE SPECIFIED IN THE INSPECTION INSTRUCTIONS. INSPECTIONS BY THE CODE ENFORCEMENT OFFICER MUST BE APPROVED BEFORE YOU PROCEED TO THE NEXT STAGE OF CONSTRUCTION. SHOULD THE BUILDING INSPECTOR/ZONING OFFICER BE REQUIRED TO MAKE ADDITIONAL INSPECTIONS, A RE-INSPECTION FEE WILL BE DUE TO DEFRAY THE COST OF THE INSPECTION. THE ENTIRE FEE MUST BE PAID PRIOR TO THE INSPECTION.

ELECTRICAL INSPECTIONS MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

PLEASE NOTE: As the appointed Third-Party Agency, Technicon Enterprises, Inc., II will perform all electrical inspections for all permitted work under the Uniform Construction Code. To schedule inspections, please call (610) 286-1622.

INSPECTION #1: FOOTINGS

MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

This inspection is to be scheduled AFTER excavation is completed and forming for footings, reinforcement and grade stakes have been installed. Concrete <u>MAY NOT</u> be poured until this Inspection has been completed and approved by the Code Enforcement Officer. For pre-cast walls the stone placement must be inspected prior to the wall placement. **Note:** Footings are required to have smooth side and sharp corners, be continuous and of appropriate size. Property lines or setback lines MUST be staked accurately to identify those property lines.

INSPECTION #2: PRE-POUR MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

Concrete walls and ICF walls: Forms set and pinned and rebar installed and supported prior to concrete

INSPECTION #3: FOUNDATION BACKFILL

MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

This inspection will be made upon your completion of foundation and foundation drains but PRIOR to any backfilling and setting of joists in a frame structure or upon completion of all walls before setting floor joists in a masonry structure (exception pre-cast walls). All parging and waterproofing must be completed prior to this inspection. Foundation drains will also be inspected at this time. UNDER NO CIRCUMSTANCES IS BACKFILLING TO BE STARTED UNTIL THIS INSPECTION #3 HAS BEEN COMPLETED AND APPROVED BY THE CODE ENFORCEMENT OFFICER.

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INSPECTION #4: ROUGH FRAMING

MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

This inspection will be made upon completion of all framing and completion of all rough-ins. All concealed plumbing and mechanical equipment should be installed prior to calling for this Inspection and <u>must</u> be tested at this time. An electrical rough wiring inspection sticker must be posted on-site at this time. The plumbing system pressure testing must be performed on all waste and drainage, water supply, and natural gas piping at the time of inspection as required by the International Residential Code.

All fire stopping, fire blocking, fire caulking must be in place prior to the rough framing inspection.

UNDER NO CIRCUMSTANCES SHOULD ANY INSULATION, DRYWALL OR PLASTERING BE STARTED BEFORE INSPECTION #4.

INSPECTION #5: WALLBOARD OR LATHE

INSPECTION

MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

This inspection will be made after the installation and completion of all wallboard and/or lathe. However, under no circumstances should any plastering or taping and finishing of joints and fasteners be done <u>prior</u> to this Inspection. A certificate of compliance from the energy installer is required at this time.

INSPECTION #6: FINAL INSPECTION / CERTIFICATE OF OCCUPANCY

MINIMUM TWENTY-FOUR (24) HOUR WORKING NOTICE IS REQUIRED

The final inspection will be made upon completion of the structure. Prior to the final inspection the following items must be completed: grading, seeding, installation of any driveway and a final electrical inspection sticker must be placed on the main electrical panel. No Use and Occupancy Permit will be issued until the Code Enforcement Officer has determined that the structure is in full compliance with the approved Building Plans and provisions of all Codes.

Septic approval and potable water test (if well) are required to be submitted before a Use & Occupancy Certificate will be issued.

NOTE: NO DWELLING OR STRUCTURE MAY BE OCCUPIED IN ANY MANNER UNTIL THE ISSUANCE OF A FINAL USE AND OCCUPANCY PERMIT. ANY DEVIATION FROM THE APPROVED BUILDING PLANS SUBMITTED WITH YOUR ORIGINAL APPLICATION MUST BE APPROVED BY THE BUILDING CODE OFFICIAL, IN WRITING, BEFORE PROCEEDING WITH ANY CHANGE.

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Received Date Stamp

UNIFORM CONSTRUCTION CODE BUILDING RESIDENTIAL PERMIT APPLICATION	
L	

County: Lancaster Municipal		
Sit Address:	-	-
Lot #: Subdivision/Land Devel	lopment:	Phase: Section:
Lot Size (Dimensions)		
Owner/Agent:	Phone #	Fax #
Mailing Address:		Cell #
E-Mail Address:		
Principal Contractor:	Phone #	Fax #
Mailing Address:		Cell #
E-Mail Address:		
Architect:	Phone #	Fax #
Mailing Address:		Cell #
E-Mail Address:		
TYPE OF WORK OR IMPROVEMENT (Alteration Repair	☐ Demolition ☐ Renovation
Change of Use Plumbing I	Mechanical Electrical	Electrical Service
Describe proposed work:		
ESTIMATED COST OF CONSTRUCTION	【 (reasonable fair market value)	3
BUILDING/SITE CHARACTERISTICS Number of residential dwellings Mechanical: Indicate type of Heating / V Water Service (check) Public Sewer Service (check) Public Existing Electric (check) Yes	Existing	Proposed ectric, gas, oil, etc.)
FLOODPLAIN Is the site located within an identified flood Will any portion of the flood hazard area be		□Yes □No □Yes □No □N/A

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Lowest Floor Level:	
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The applicant certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and <u>PA Act 45 (Uniform Construction Code)</u> and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assume the responsibility of locating all property lines, setback lines, easements, rights-of-way, flood areas, etc. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a 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.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provision of the code(s) applicable to such permit.

I/WE HAVE RECEIVED A COPY OF THE REQUIRED INSPECTIONS AND ARE FULLY AWARE OF THESE REQUIREMENTS.

Date:	Applicant's Signature	_
Date:	Applicant's Signature	_
Signature of Owner or Authorized Agent	Print Name of Owner or Aut	horized Agent
Address		Date
Directions to Site:		

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EAST COCALICO TOWNSHIP

100 HILL ROAD, DENVER, PA 17517

APPLICANT:
ADDRESS:
SIGNATURE:
Please complete the below to calculate the total proposed and existing building and impervious surface coverages, and return this form with your permit application. This information is needed to issue a permit for your project. Please contact the Codes Department at (717) 336-1710 to obtain the gross lot area for your property, or if you require additional information.
CALCULATE BUILDING COVERAGE
Note Building coverage includes any structure or improvement that is "under roof".
sf <i>proposed</i> improvement(s)
sf existing home/office/building
sf_existing garage
sf existing shed
sf existing other
sf total proposed and existing building coverage (add all above)
sf gross lot area
% BUILDING COVERAGE PERCENT (= total building coverage / gross lot area)
CALCULATE IMPERVIOUS COVERAGE Note Impervious coverage includes any structure or improvement that does not allow water to infiltrate into the ground.
sf proposed improvement(s)
sf existing driveways & walkways
sf existing patio
sf_existing pool and coping
sf existing other sf total proposed and existing building coverage (from above)
si total proposed and existing building coverage (<i>from above</i>)
sf total proposed and existing impervious coverage (add all above)
sf gross lot area
% IMPERVIOUS COVERAGE PERCENT (= total impervious coverage / gross lot area)

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PENNSYLVANIA WORKERS COMPENSATION INSURANCE COVERAGE INFORMATION

A.	The Applicant Is			
	A contractor within the meaning of the Pennsylvania Workers' Compensation LawYesNo			
	If the answer is "Yes" complete Section B and C below as appropriate.			
В.	Insurance Information			
	Name of Company: Phone:			
	Address:Contact Name:			
	Applicant is a qualified self-insurer for workers' compensation			
	Attach insurance certificate			
	Applicant carries workers' compensation coverage with an insurance company	Applicant carries workers' compensation coverage with an insurance company		
	Name of Workers' Compensation Insurer:			
	Workers' Compensation Policy No.: Policy Expiration Date:			
	Attach insurance certificate			
<u> </u>	. Exemption			
	omplete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.			
The	he undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the pro f the Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:	visions		
	Contractor with no employees. Contractor prohibited by law from employing any individual to perform work put to this building permit unless contractor provides proof of insurance to the Township.	ırsuant		
	Religious exemption under the Workers' Compensation Law.			
D.	D. Signature			
ins	Ay signature as the contractor indicates my understanding of the requirements to provide proof of Workers' Compensati Insurance as need and verifies that all statements made above are true. I understand that if I am a contractor requesting Exemption under the Workers' Compensation Act, I must sign this form in front of a notary public.			
Sig	ignature: Date:			
CO	COMMONWEALTH OF PENNSYLVANIA COUNTY OF LANCASTER			
	ON THIS, the day of, 202, before me, the undersigned officer, personally ppeared, and being authorized to do so, executed this instrument for the purpose			
cor	ppeared, and being authorized to do so, executed this instrument for the purpose ontained herein.	! S		
	IN WITNESS WHEREOF, I hereto set my hand and official seal.			
	NOTARY PUBLIC			
	My commission expires:			
	SEAL			

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FOR CODE ADMINISTRATOR USE ONLY ADDITIONAL PERMITS/APPROVALS REQUIRED

STREET CUT/DRIVEWAY		APPROVED	
PENNDOT HIGHWAY OCCUPA	ANCY	APPROVED	
DEP FLOODWAY OR FLOODP	LAIN	APPROVED	
EROSION AND SEDIMENT CO	NTROL PLAN	N APPROVED	
SEWER CONNECTION		APPROVED	
ON-LOT SEPTIC		APPROVED	
ZONING		APPROVED	
PUBLIC WATER CONNECTION	١	APPROVED	
STORMWATER		APPROVED	
OTHER		APPROVED	
BUILDING PERMIT DENIED:	AP	PPROVALS Date Returned	
BUILDING PERMIT APPROVED:	•		
CODE ADMINISTRATOR	Date		
BUILDING PERMIT FEE	\$	Receipt #	
ZONING PERMIT FEE	\$	Receipt #	
PLUMBING PERMIT (if appl.)	·	Receipt #	
MECHANICAL PERMIT (if appl.)		Receipt #	
ELECTRICAL PERMIT (if appl.)		Receipt #	
DRIVEWAY PERMIT (if appl.)		Receipt #	
CURB AND SIDEWALK (if appl.)		Receipt #	
I OT SIZE	ZONING	S INFORMATION ZONE	
LOT SIZE			
Minimum Setback Front Yard (fro	m right-of-w	ay iine)	
Minimum Setback Rear Yard		-	
Minimum Setback Side Yard – Ea	ich Side / Ag	gregate	
	BUILDIN	IG DIMENSIONS	
Existing Building Area:	sq. ft.	Number Of Stories:	
Proposed Building Area:	sq. ft.	Height of Structure Above Grade:	ft.
Total Building Area:	sq. ft.	Area of the Largest Floor:	sq. ft.

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