

NON-RESIDENTIAL CONSTRUCTION PERMIT APPLICATION

INCLUDES ZONING, BUILDING, HVAC, ELECTRICAL, PLUMBING, FIRE ALARM AND SUPPRESSION

BASIC SUBMISSION REQUIREMENTS

TO BE ACCEPTED, PERMIT APPLICATIONS MUST CONTAIN EACH OF THE FOLLOWING:

- A Completed Non-Residential Construction Permit Application (Be sure to include Suite #, Cost of Construction, Gross Square Footage, Description of Work, Applicant's Contact Info & Email Address, etc.)
- Up to FOUR (4) Sets of plans – See each discipline's Section for specific requirements
- Plot Plan showing area of work within lot or building, including site address
- Application Fee: \$50 per Discipline Review Requested
Check made out to **South Whitehall Township**
- Third Party Fee (please call for amount due)
- Business Privilege License for Contractor
- Certificate of Insurance showing Worker's Compensation for Contractor

**APPLICANT WILL BE ASKED TO SHOW ALL "CHECKED" ITEMS
ABOVE SEPERATELY TO DEMONSTRATE A COMPLETE SUBMISSION**

Please submit all documents to the Township 4444 Walbert Avenue, Allentown PA 18104

INSTRUCTIONS

These instructions are informational only and do not include all possible applications.

SECTION 1: APPLICANT INFORMATION

Property Address indicates the street address of the property at which the proposed work will take place.

Applicant refers to the person requesting the permit. This is the person we will be contacting for all issues relating to the permit.

Contractor refers to the person or company doing the work for which this permit is required.

Owner refers to the owner of the property upon which the work requiring this permit is being done.

SECTION 2: BUILDING/ZONING REVIEW

APPLICATION FOR:

New Building refers to a new residential or commercial building or structure

Exterior Alteration refers to roofing, siding, windows, façade, mansard, architectural dormer, etc.

Interior Alteration refers to all interior renovations that do not increase the building's overall size.

Addition to Building refers to construction which increases the building or structure's floor area.

Accessory Building refers to detached structures which are incidental to the primary building.

Temporary Building refers to tents or other structures that are erected for less than 180 days.

Razing refers to the complete demolition of a building or structure.

Change of Use refers to a change of the purpose within a structure such as may occur when a tenant moves out and a new tenant moves in; for example, an existing store to become an office. Often used in conjunction with "New Commercial Tenant".

New Commercial Tenant refers to a non-residential use moving into an existing commercial space.

Parking Lot refers to an area for off-street parking with a capacity of 4 or more vehicles.

Please use the blank checkbox/blank space to indicate any proposed work not applicable to the above categories.

PROPOSED USE: refers to the building or structure to which the proposed work will be done. The following list of uses is not all-inclusive.

Place of Assembly refers to buildings or spaces such as churches, restaurants, theaters, nightclubs, lecture halls, libraries and recreation centers.

Business (Office) refers to a building where the rendering of professional services is offered, such as banks, dentist offices or barber shops.

Educational refers to structures which accommodate more than 5 persons for educational purposes through the 12th grade.

Factory or Industrial refers to structures where the occupants are engaged in work or labor in fabricating, assembling, or processing of products or materials.

High Hazard refers to structures that manufacture, store, process or generate hazardous materials in excess of code requirements in the building or fire code.

Institutional refers to buildings or structures such as child care facilities, group homes, convalescent homes, hospitals or detention centers.

Mercantile (Store) refers to display and sales purposes involving stocks of goods, wares or merchandise that are open to the public.

Multi-Family Dwelling refers to a building or portion thereof that contains more than 2 dwelling units.

Storage refers to commercial structures such as warehouses.

Utility and Misc. refers to residential structures such as grain silos, livestock shelters and greenhouses.

Please use the blank checkbox/blank space to indicate any proposed work not applicable to the above categories.

LOT INFORMATION can be obtained from a plot plan of the lot and refers to the lot and building or structure to which the proposed work is being done. This information should also be included in the sketch plan accompanying the permit application.

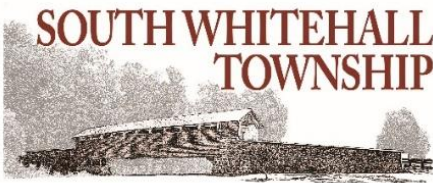
Flood Plain status, water and sewer service, and **Zoning District** may be obtained from the Township Zoning Officer. Some information is also available on the **Zoning Portal** of the South Whitehall website.

Please include as detailed and complete **Description of Work** proposed as possible within the space constraints.

SECTION 6: FIRE ALARMS refers to fire alarm systems being installed according to building code requirements. Fire Alarm reviews also include an Electrical review for the electrical components of the alarm system.

SECTION 7: FIRE SUPPRESSION refers to existing suppression systems being upgraded to code or new suppression systems being installed. Suppression systems include fire sprinkler, kitchen hood and duct systems, and clean-agent systems.

NON-RESIDENTIAL CONSTRUCTION PERMIT APPLICATION



FOR STAFF USE ONLY

PROJECT #: _____

DATE RECEIVED: _____

- BUSINESS PRIVILEGE LICENSE
- WORKER'S COMPENSATION
- THIRD PARTY REVIEW FEE

SECTION 1: APPLICANT INFORMATION

PLEASE PRINT LEGIBLY AND FILL OUT FORM COMPLETELY

PROPERTY ADDRESS: _____ PROPERTY PIN: _____

APPLICANT NAME: _____ APPLICATION DATE: _____

PHONE: (____) _____ CELL: (____) _____ EMAIL: _____

APPLICANT ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____ FAX: _____

An application is hereby made for a permit for construction as indicated herein and which shall be located as shown on the plot plan submitted herewith and/or to use the premises for the purpose herein described. Applicant agrees that such work will comply with all provisions of the Zoning Ordinance, Building Code, with all deed restrictions and with all other applicable Ordinances of South Whitehall Township.

APPLICANT PRINTED NAME: _____ SIGNATURE (REQUIRED): _____

IF THIS APPLICATION IS NOT BY THE PROPERTY OWNER, THEN BY WHAT AUTHORITY: _____

CONTRACTOR NAME: _____ PHONE: (____) _____

CONTRACTOR ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

PROPERTY OWNER NAME: _____ PHONE: (____) _____

OWNER ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

DISCIPLINE REVIEW REQUESTED \$50 Application Fee Each (CHECK AND COMPLETE ALL THAT APPLY)

- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING/ZONING See Section 2 | <input type="checkbox"/> PLUMBING See Section 4 | <input type="checkbox"/> FIRE ALARM See Section 6 |
| <input type="checkbox"/> MECHANICAL See Section 3 | <input type="checkbox"/> ELECTRICAL See Section 5 | <input type="checkbox"/> FIRE SUPPRESSION See Section 7 |

FEEES AND APPROVALS FOR STAFF USE ONLY

APPROVALS:	REVIEWER	DENIAL	DATE	APPROVED	DATE	PERMIT NUMBER	ISSUANCE DATE
<input type="checkbox"/> PLANNING	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> ZONING	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> BUILDING	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> MECHANICAL	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> ELECTRIC	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> PLUMBING	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> FIRE	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____
<input type="checkbox"/> PUBLIC WORKS	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>	_____	_____	_____

Application Fees \$ _____

See Following Pages for Application Fees

PLEASE BE AWARE THAT FEES WILL BE DUE UPON PERMIT ISSUANCE

Issuance Fees \$ _____
(Fees Will Vary)

PA Act 157 Fees \$ _____

Balance Due \$ _____

Applicant Called: _____

Check # _____

Check # _____

APPROVAL CONDITIONS:

PERMIT ISSUED BY: _____ TITLE: _____ DATE: _____

IF NOT PICKED UP BY APPLICANT, BUILDING PERMIT EXPIRES ONE HUNDRED EIGHTY (180) DAYS AFTER APPROVAL DATE OR ZONING PERMIT EXPIRES ONE (1) YEAR AFTER APPROVAL DATE

PLOT PLAN REQUIREMENTS

Each plan shall be submitted with a plot plan that shows the following:

- ➔The physical address of the work site (not simply the building or property address). Include floor and/or suite numbers, if applicable.
- ➔The location of the work site relative to the property lines.
- ➔If within a building, show the work site relative to the building footprint and indicate which floor or floors upon which the work is taking place.
- ➔All existing and proposed structures and buildings, including eaves, cornices, porches, chimneys, decks, sheds, etc.
- ➔The setbacks of all structures and buildings from all property lines.
- ➔Existing and future (ultimate) right-of-way lines should also be shown along all streets fronting the subject property.

*Please note that right-of-way lines are customarily measured from the centerline of the street.

NOTE THAT PERMIT APPLICATIONS THAT CONTAIN A PLOT PLAN THAT DO NOT CONTAIN THE ABOVE INFORMATION ARE SUBJECT TO DENIAL FOR LACK OF INFORMATION

SECTION 2 BUILDING/ZONING REVIEW: \$50 Application Fee

To ensure timely plan review, please submit four (4) complete sets of plans and specs

See INSTRUCTIONS on Page 2 for more information on the categories listed below:

APPLICATION FOR: (PLEASE CHECK <u>ALL</u> THAT APPLY)		PROPOSED USE:	LOT DETAILS:
<input type="checkbox"/> New Building	<input type="checkbox"/> Change of Use	<input type="checkbox"/> Place of Assembly	<input type="checkbox"/> In Flood Plain <i>Requires a Special Flood Hazard Permit Application</i>
<input type="checkbox"/> Exterior Alteration	<input type="checkbox"/> New Commercial Tenant <i>List the prior Use below:</i>	<input type="checkbox"/> Business (Office)	<input type="checkbox"/> Multi-Family Dwelling
<input type="checkbox"/> Interior Alteration	_____	<input type="checkbox"/> Educational	<input type="checkbox"/> Storage
<input type="checkbox"/> Addition to Building	_____	<input type="checkbox"/> Factory or Industrial	<input type="checkbox"/> Utility and Misc.
<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Parking Lot	<input type="checkbox"/> High Hazard	<input type="checkbox"/> Served by Public Water
<input type="checkbox"/> Temporary Building	_____	<input type="checkbox"/> Institutional	<input type="checkbox"/> Served by Private Well
<input type="checkbox"/> Demolition/Razing	<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> Served by Public Sewer
			<input type="checkbox"/> Served by Private Septic
			Zoning District _____

STRUCTURE INFORMATION: PA ONE Call #: _____ Date: _____

PROPOSED GROSS AREA TO BE CONSTRUCTED OR ALTERED (measured outside-to-outside dimensions of all levels of the structure, and shall include basements, bays, hallways, stairways, utility/mechanical rooms, storage rooms, lobbies, attached garages, foyers, elevators, decks, and attics that have a minimum headroom of 6 feet): _____ sq ft

DETAILED DESCRIPTION OF PROPOSED WORK: COST OF PROPOSED WORK: \$ _____

FORM CONTINUES ON THE NEXT PAGE

SECTION 3 MECHANICAL REVIEW: \$50 Application Fee
 To ensure timely plan review, please submit three (3) complete sets of plans and specs

CONTRACTOR NAME: _____ PHONE: (____) _____
 CONTRACTOR ADDRESS: _____ FAX/CELL: _____
 CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

JOB TYPE <input type="checkbox"/> New Unit <input type="checkbox"/> Replace Existing Unit <input type="checkbox"/> New Fuel Type <input type="checkbox"/> Existing Fuel Type	TYPE OF JOB <input type="checkbox"/> Heating <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Ventilation <input type="checkbox"/> Other: _____	TYPE OF UNIT <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Steam <input type="checkbox"/> Heat Pump <input type="checkbox"/> Forced Air <input type="checkbox"/> Geothermal <input type="checkbox"/> Wood <input type="checkbox"/> Electric <input type="checkbox"/> Boiler <input type="checkbox"/> Other: _____
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DESCRIPTION OF PROPOSED WORK: _____ COST OF PROPOSED WORK: \$ _____

SECTION 4 PLUMBING REVIEW: \$50 Application Fee
 To ensure timely plan review, please submit three (3) complete sets of plans and specs. Show all vent sizes on plan.

CONTRACTOR NAME: _____ PHONE: (____) _____
 CONTRACTOR ADDRESS: _____ FAX/CELL: _____
 CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

PA ONE Call # (IF NEEDED): _____ Date: _____

NUMBER OF TRAPPED FIXURES: _____ NEW SEWER LINE? YES NO NEW WATER LINE? YES NO

SANITARY PIPE MATERIAL: _____ WATER PIPE MATERIAL: _____

DESCRIPTION OF PROPOSED WORK: _____ COST OF PROPOSED WORK: \$ _____

SECTION 5 ELECTRICAL REVIEW: \$50 Application Fee
 To ensure timely plan review, please submit three (3) complete sets of plans and specs

CONTRACTOR NAME: _____ PHONE: (____) _____
 CONTRACTOR ADDRESS: _____ FAX/CELL: _____
 CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

APPLICATION FOR: <input type="checkbox"/> COMPLETE <input type="checkbox"/> WIRING <input type="checkbox"/> SERVICE <input type="checkbox"/> POOL <input type="checkbox"/> BONDING	TYPE OF WORK: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> ADDITION <input type="checkbox"/> ALTERATION ELECTRIC HEAT: <input type="checkbox"/> YES <input type="checkbox"/> NO	SERVICE INFORMATION: <input type="checkbox"/> NEW <input type="checkbox"/> REPAIR TO USE EXISTING WIRING? <input type="checkbox"/> YES <input type="checkbox"/> NO Size of Service (amps): _____ Voltage and Phase: _____ Number of Meters: _____ Subpanels: _____	PPL # _____ SERVICE AIC # _____ PA ONE _____ <input type="checkbox"/> Overhead <input type="checkbox"/> Underground
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FORM CONTINUES ON THE NEXT PAGE

SECTION 5 ELECTRICAL REVIEW (CONTINUED)

ENTER THE QUANTITY OF EACH OF THE FOLLOWING:

RECEPTACLES: _____ SWITCHES: _____ LIGHTS: _____ OTHER OUTLETS: _____ HVAC EQUIPMENT: _____

SIGNS: _____ SITE LIGHTS: _____ ABOVE-GROUND POOL: _____ IN-GROUND POOL: _____ SPA: _____

TRANSFORMERS (NUMBER AND SIZE OF EACH): _____

GENERATOR (FUEL TYPE AND SIZE IN KW OF EACH): _____

OTHER: _____ TOTAL ITEMS: _____

DESCRIPTION OF PROPOSED WORK: _____ COST OF PROPOSED WORK: \$ _____

 SECTION 6 FIRE ALARM REVIEW: \$50 Application Fee

To ensure timely plan review, please submit three (3) complete sets of plans and specs

CONTRACTOR NAME: _____ PHONE: (_____) _____

CONTRACTOR ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

STRUCTURE INFORMATION: New Structure Existing Structure

Present Use: _____ Proposed Use: _____

DESCRIPTION OF PROPOSED WORK: _____ COST OF PROPOSED WORK: \$ _____

 SECTION 7 FIRE SUPPRESSION REVIEW: \$50 Application Fee

To ensure timely plan review, please submit two (2) complete sets of plans and specs

CONTRACTOR NAME: _____ PHONE: (_____) _____

CONTRACTOR ADDRESS: _____ FAX/CELL: _____

CITY: _____ STATE: _____ ZIP CODE: _____ EMAIL: _____

STRUCTURE INFORMATION: New Structure Existing Structure

Present Use: _____ Proposed Use: _____

DESCRIPTION OF PROPOSED WORK: _____ COST OF PROPOSED WORK: \$ _____
