PROCEDURE FOR OBTAINING A MECHANICAL PERMIT

- 1. Fully complete the application for your permit making sure to date and sign it and return it along with the required application fee. The applicant for a permit may be the owner or owner's agent. (Please note that although the application fee is non-refundable, it will be applied toward the total cost of your permit(s), with the balance due at pick-up.)
- 2. For residential applications, the Building Inspector has a **3 week** period to review and approve or deny your permit application. For non-residential (commercial), **6 weeks** is allotted. Make sure there are daytime and evening telephone numbers for the Building Inspector to reach you should there be any questions about your application.
- 3. After the application has been approved, the applicant will be contacted when the permit is ready to be picked up and informed of the balance due. At pick up you will be asked to sign all copies of the permit, pay the balance of the permit fee and you will be given a check list with the inspection requirements for your project.
- 4. Permits are valid for one (1) year from date of issuance. The building official is authorized to grant, in writing, one or more extensions of time, for periods not more than 180 days each. The extension shall be requested in writing and justifiable cause demonstrated. An additional fee will apply.
- 5. If you have any questions concerning your application, please contact Kraft Code Services at 610.775.7185. If no one is available when you call, please state the municipality your call pertains to and leave a detailed message.
- 6. **PLEASE NOTE**: No construction may begin without paying for and receiving your approved permit. Performing work without a permit will result in the doubling of all permit fees.

The	e following requirements must be met for approval of your mechanical permit application:							
	Application fee. (Applications received without the required application fee will be considered incomplete							
	and will not be processed.)							
	Fully completed Mechanical Permit application							
	Copy of the manufacturer's installation instructions for the proposed equipment to be installed.							
	Two (2) sets of construction drawings including the following:							
	 Floor plan showing dimensions of the room and the location of all the equipment (new and existing) in the room with equipment clearances 							
	 Equipment schedules listing equipment number, CFM, Outdoor Air CFM, Cooling & Heating electrical characteristics 							
	Electrical permit application (if necessary – required if equipment is new or equipment type is changed)							
	Proof of contractor workers' compensation insurance or notarized exemption form.							

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MECHANICAL PERMIT APPLICATION

Municipality in which wo	rk will b	pe performed:				
PROPERTY INFORMAT	ION					
Owner:			P	Phone #:		
Street Address:						
City/State/ Zip:						
Cell #: Fax #:			Er	mail:		
CONTRACTOR INFORM	1ATION	l .				
Contractor:				none #:		
Street Address:						
City/State/ Zip:						
Contact Person:						
Cell #:	Fax #:	Er	mail:			
IMPROVEMENT INFOR	MATIC	ON:				
Location:			Cost	t of improvement:		
Type of Work:	Constru	iction Addition Alte	ration/I	Replacement \square Pool		
Service feeder/distribution	on pane	l: □ New □ Exist	ing S	Size: Amps		
Brief description of work	:	CODES	SER	VICES≅		
EQUIPMENT IDENTIFIC	CATION	V				
Туре	#	Туре	#	Туре	#	
Split System Gas/Electric		Split System Electric/Electric		Heat Pump Split System]
Packaged terminal A/C		Boiler Hot Water		Steam Boiler (PSI)]
be in conformance with the Pe be performed as well as in according begin work, but only an application work starts without a permit. Information will be invalid and	ennsylvan ordance v ation for a I understa the mun	ge that all information provided in to ia Uniform Construction Code and/o with the approved plan after a plan a permit and that work is not to stan and that if I give false information re icipality could initiate legal proceed my expense or any other legal remen	or any ap review ha rt withou egarding t ings agair	plicable ordinances of the municipals been completed. I understand that a permit and that the fees for the this permit application that any pents the, which could result in my be	ality in whi hat this is r permit ma rmits issue	ch the work is to not a permit to ay be doubled if d based on this
Applicant Signature				Date		

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PENNSYLVANIA WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION FORM

Please complete all applicable sections of this form paying special attention to the documentation requirements listed in each section. The building and/or zoning permit that you are requesting will not be issued until this form is completed properly.

1.	Are you the homeowner/property owner performing the work (as requested in this application) yourself?
	 □ No - go to question #2 □ Yes - read this exemption statement, sign to indicate your understanding and submit this form with your application "Homeowner swears/affirms that he/she will be performing all work on this project and no outside contractors will be
	employed on this project."
	Signature: Date:
2	Are you the homeowner/property owner who has hired a contractor to perform the work (as requested in this application)?
	□ No – go to question #3 □ Yes – please have your contractor complete Sections A & B
	Tes – piease have your contractor complete sections A & B
3. /	Are you the contractor hired by the homeowner/property owner to perform the work as requested in this application)? \(\subseteq \text{Yes} - \text{complete Section A & B} \) \(\subseteq \text{No - please explain:} \)
Α.	Name of Company
	Contact person Phone #
	Address of company
	Federal or State Employee Identification # Please select one of the following options:
	☐ Applicant is a qualified self-insurer for workers' compensation
	✓ Please attach a copy of the insurance certificate listing the municipality in which the work will be performed as a
	certificate holder
	Applicant carries workers' compensation coverage with an insurance company
	\checkmark Please attach a copy of the insurance certificate listing the municipality in which the work will be performed as a certificate holder
	□ Applicant is exempt from providing workers' compensation insurance because:
	☐ The contractor is a sole proprietorship without employees (The contractor is prohibited by law from employing any
	individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the
	municipality.)
	☐ All of the contractor's employees on the project claim an exemption based on religious grounds as defined in Section 304.2 of the Workers' Compensation Act.
	Note: If you are requesting an exemption from the Workers' Compensation Act requirements, you must sign in Section B
	in front of a notary public.
	Will you be using any subcontractor(s) on this project?
	insurance as required under the remissivalia workers compensation Act.)
В.	My signature as the contractor indicates my understanding of the requirements to provide proof of Workers' Compensation
	urance as needed and verifies that all statements made above are true. I understand that if I am a contractor requesting an
ex	emption under the Workers' Compensation Act that I must sign this form in front of a notary public.
Sig	nature Date
	dress
,	
	TARIZATION REQUIRED FOR CONTRACTORS REQUESTING EXEMPTION FROM PROVIDING WORKERS COMPENSATION INSURANCE
	unty Municipality of
Μy	y commission expires: Subscribed and sworn to before me this-
	day of20
SE	AL

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