Sadsbury Township

Permit # _____
Parcel # _____
ABI # _____
Date Received ___/___/_____
Date Approved ___/___/_____

COMMERCIAL/RESIDENTIAL BUILDING PERMIT APPLICATION

Application Type (Check all that apply) ❒ **Commercial** ❒ **Residential**	❒ Addition ❒ Accessibility Only Review ❒ Alteration or Renovation ❒ Uncertified Existing Building ❒ New Building / NSF Dwelling ❒ Change of Use and Occupancy	❒ Phased Approval (commercial only) ❒ **If Phased Approval indicate total number of phases and describe scope of work for each phase. A plan shall be submitted with an outline defining each phase of the plan.**
Use/Occupancy Classification: Check box to left of applicable group. (Check all that apply)	❒ A-1 ❒ A-2 ❒ A-3 ❒ A-4 ❒ A-5 ❒ B ❒ E ❒ F-1 ❒ F-2 ❒ H-1 ❒ H-2 ❒ H-3 ❒ H-4 ❒ H-5 ❒ I-1 ❒ I-2 ❒ I-3 ❒ I-4 ❒ M ❒ R-1 ❒ R-2 ❒ R-3 Adult Care ❒ R-3 ❒ R-4 ❒ S-1 ❒ S-2 ❒ U	
Site Information (Subdivision & County names are required.)	Project Name_____ Street Name and # _____ City_____ State_____ Zip Code _____ Subdivision_____ County _____	

Special Requirements and Documentation

Proposed timeline must be filled out for all commercial jobs.

Check each block below indicating that all the following will be submitted with this application:

❒ Two (2) site plans ❒ Two (2) complete sets of construction drawings
❒ One (1) completed copy of the ABI-2 UCC PLAN REVIEW CHECKLIST
❒ One (1) set of specifications (only if Addition, Alteration, New Building or New Structure/Facility)
❒ PDF files of design drawings ❒ **Proposed project timeline _____ yr/mo(s)**

Does this construction involve modular units built in a factory	❒ Yes ❒ No	If "Yes", submit 1 copy of a letter from a licensed design professional certifying that construction within the modular units (or the fully assembled modular building) and hidden from view will fully comply with all requirements of the UCC.
Is this construction regulated by the Health Care Facilities Act?	❒ Yes ❒ No	If "Yes", submit 1 copy of approval letter from the Pennsylvania Department of Health.
Is this construction exempt from energy code requirements?	❒ Yes ❒ No	If Yes", submit 1 copy of letter indicating that the building or structure will use neither electricity nor fossil fuels, and thus is exempt per *ASHRAE 90.1,* §2.3(B). If "No", submit 1 copy of the COMcheck-EZ Certificate or the UCC-14 ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT.
Is project in flood hazard area?	❒ Yes ❒ No	If "Yes", submit 1 copy of one of the flood hazard certifications mandated in section 1612.5 of the *International Building Code.*
Are any of the *International Building Code* (Chapter 17) special inspection or structural observations required?	❒ Yes ❒ No	If "Yes", submit 1 copy of the ABI-6 SPECIAL INSPECTIONS OBSERVATIONS STATEMENT.

	Will an alternative construction method or material be used on this project?	❒ Yes ❒ No	**If "Yes", submit a signed statement indicating** that the proposed method or material meets the requirements of 34 PA Code §403.44.
	Is this application for "temporary certificate of occupancy" (Phased Approval)? A building code official may issue a temporary certificate of occupancy (Phased Approval) for a portion or portions of the building or structure before the completion of the entire work covered by the permit if the portion or portions may be occupied safely. The building code official shall set a time during which the temporary certificate of occupancy is valid.	❒ Yes ❒ No	**If "Yes", submit a letter signed by the design** professional and owner acknowledging that the request for phased construction. For Phased Approval applicant shall indicate total number of phases and describe scope of work for each phase. A plan shall be submitted with an outline defining each phase of the plan. Inspection fees shall be based on a cost per phase. Plan review fees may, depending on level of submittal, cover entire project or each phase only per judgment of plans examiner.
	Construction Phase Requiring Certificate of Use & Occupancy	❒ Yes ❒ No	Which Phases?

Project Data (Commercial Projects only)	Type(s) of construction per Chapter 6 of the *International Building Code* (check all that apply): ❒ IA ❒ IB ❒ IIA ❒ IIB ❒ IIIA ❒ IIIB ❒ IV ❒ VA ❒ VB Fire suppression: ❒ Full ❒ Partial ❒ None **If application applies to an existing building that is "legally occupied," indicate** permits held: Fire and Panic Occupancy Permit ❒ Fire Number: _____ Municipal Occupancy Permit ❒ Permit Number: _____ Municipality Name: _____ L&I UCC Certificate of Occupancy ❒ File Number: _____ **If "legally occupied," you must select which code** requirements the building will comply with (choose only one): ❒ *International Existing Building Code* ❒ *International Residential Building Code* Which triennial codes must this work comply with? ❒ 2015 (cut off is Aug.14, 2022) ❒2018
Design Professional in Responsible Charge Seal must be in space to right of name and address.	Name: _____ Address: _____ _____ PA License #: _____ E-Mail: _____ Phone: _____ Fax: _____

Property Owner Information	Property Owner Name: _____ Street Address: _____ City: _____ State: _____ Zip Code: _____ Phone Number: _____ E-mail: _____
Deferred Submissions **(Check all that apply)** **(All deferred submissions will need to be submitted within 30 days of project approval unless other arrangements have been discussed)**	Are you requesting deferred approval? ❒ Yes ❒ No Provide a written request on the construction disciplines to be deferred. Please check disciplines you wish to defer: ❒Architectural ❒Plumbing ❒Structural ❒Electrical ❒Mechanical ❒Fire Protection Systems ❒Accessibility ❒Energy/Insulation ❒Underslab Plumbing ❒Underslab Electrical ❒Underslab Mechanical ❒_____ Provide two (2) sets of signed and sealed drawings for all those disciplines you wish to construct.

Applicant's Certification:

As the owner or the authorized agent of the project for which this application is filed, I certify that:
The building or structure described in this application will not be occupied until all known code violations are corrected and a Certificate of Occupancy has been received from the local municipality. This project will be constructed in accordance with the approved drawings and specifications (including any required non-design changes) and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401-405. Any changes to the approved documents will be filed with Associated Building Inspections LLC and the local municipality.
When required, up to 20% of the total cost of any work performed on any area of primary function in an existing building will be expended to provide an accessible route to the area of primary function. No error or omission in either the drawings and specifications or application, whether approved or not, shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405 of the Pennsylvania Uniform Construction Code.

Applicant Name: _____

Applicant Signature: _____ Date: _____

Applicant E-mail: _____

Billing Information

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Email: _____

Applicant is responsible for the payment of ABI fees unless otherwise noted.