

WEST COCALICO TOWNSHIP
P.O. Box 244
Reinholds, PA 17569
(717) 336-8720

ZONING/BUILDING PERMIT APPLICATIONS
INFORMATION & PROCEDURES

1. The applicant must complete the **Zoning/Building Permit Application** for all proposals.
2. If the proposal involves commercial, industrial, multi-family residential or other uses which require approval in accordance with the Uniform Construction Code (UCC), the applicant must also complete (1) the **Application for Building Permit**, (2) the **UCC Plan Review Checklist**, (3) the **Energy Code Prescriptive Compliance Report**, and (4) the **Special Inspections and Observations Statement**, as may be applicable.
3. If the proposal involves approval under the UCC, the applicant shall
 - A. Include two (2) copies of all plans and supportive documentation as may be required by the UCC for residential uses and uses accessory to residential uses (Refer to the attached **Residential Permit Application Procedure Checklist** for further information).
 - B. Include three (3) copies of all plans and supportive documentation as may be required by the UCC for all other uses (i.e. commercial, industrial, multi-family residential).
4. The permit application packet shall be submitted to the West Cocalico Township office.
5. The Zoning Officer shall review the application information for compliance with the requirements of the West Cocalico Township Zoning Ordinance. If the application conforms to the Zoning Ordinance, she will forward the application to selected Building Code Officer (BCO), for review pursuant to the UCC.
6. BCO will contact the applicant and/or the contractor if the permit application is incomplete or needs additional information as may be required by the UCC.
7. Upon completion and approval of the plan review pursuant to the UCC, BCO will return the information to West Cocalico Township, whereupon the Zoning Officer will finalize all paperwork, determine all permit fees, and complete the **Zoning/Building Permit Application**.
8. The Zoning Officer will notify the property owner or the contractor when the permit is approved.
9. All zoning approval fees and inspection fees related to the UCC plan review and required inspections must be paid prior to the Township releasing the approved permit.
10. Questions regarding general procedures and those involving specific zoning-related issues should be directed to West Cocalico Township Zoning Officer, at (717) 336-8720.

PERMIT # _____

DATE REC'D: _____

WEST COCALICO TOWNSHIP

APPLICATION FOR ZONING/BUILDING PERMIT

Applicant's Name: _____ Telephone No. _____

Address: _____

Owner's Name: _____ Telephone No. _____

Address: _____

Address of Property: _____

Description of New Structure or Modification: _____

Construction Will Be: Stone Brick Frame Block
 Stucco Aluminum Other

Structure/Modification will contain _____ square feet and height of _____ from grade to the highest point. Dimension: _____.

Date of Completion: _____

Value of the Completed Structure or Modification: _____
(excluding land)

Proposed Use: _____

Choose (1) of 3 Building Code Inspectors:

- Associated Building Inspections, Inc.
- Commonwealth Code Inspection Service, Inc.
- Technicon Enterprises, Inc., II

NOTE: ONCE YOU HAVE CHOSEN YOUR BUILDING CODE INSPECTOR, YOU MAY NOT SWITCH TO A DIFFERENT COMPANY!

Date: _____

Applicant's Signature: _____

CONTRACTOR INFORMATION:

GENERAL CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

FRAMING CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

ELECTRICAL CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

PLUMBING CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

HEATING CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

FOUNDATION CONTRACTOR:

Business Name		
Address		
Phone	Fax	Cell

Workers' Compensation Insurance Coverage Information

A. The applicant is:

A contractor within the meaning of the Pennsylvania Workers Compensation Law;

Yes

No

If the answer is "yes", complete Sections B and C below as appropriate.

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification Number _____

Applicant is a qualified self-insurer for workers' compensation.

Certificate attached

Name of Workers' Compensation Insurer _____

Workers' Compensation Insurance Policy No. _____

Certificate attached

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provision of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

Contractor with no employees. Contractor prohibited by law from employing an individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the township.

Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this

_____ Day of _____ 20____

(Signature of Notary Public)

Signature of Applicant _____

Address _____

My commission expires: _____

County of _____

Municipality of _____

**PERMIT FEE SCHEDULE
EFFECTIVE MAY 21, 2019**

ZONING PERMIT FEES:

New construction and additions of four hundred (400) square feet or greater of living space: Twenty-five cents (\$0.25) per square foot. This schedule applies to all porches, patios, and decks, but does not apply to unfinished basements or attics. Exterior dimensions shall be utilized in determining square footage. New Ag buildings are calculated at Fifteen cents (0.15) per square foot. No permit fee for agricultural construction shall exceed \$3,000.00.

NOTE: The Zoning Officer will determine the proper fees based upon the above criteria and the plans provided with the permit application.

Demolitions, renovations and structures less than four hundred (400) square feet shall be calculated upon the cost of the improvements using the scale below:

<u>Cost of Improvement</u>	<u>Fee</u>
\$ 1 - \$ 999	\$ 50.00
\$1,000 - \$1,999	\$ 55.00
\$2,000 - \$2,999	\$ 60.00
\$3,000 - \$3,999	\$ 65.00
\$4,000 - \$4,999	\$ 70.00
\$5,000 - \$5,999	\$ 75.00
\$6,000 - \$6,999	\$ 80.00
\$7,000 - \$7,999	\$ 85.00
\$8,000 - \$8,999	\$ 90.00
\$9,000 - \$9,999	\$ 95.00
\$10,000 and over....	\$100.00 – plus \$5.00 for each \$1,000.00 or part thereof of construction cost.

BUILDING CODE APPEALS: \$650.00

***BUILDING PERMIT FEES:** To be determined by the Building Code Official following the plan review and the determination of required inspections.

DRIVEWAY PERMITS: \$65.00 – a driveway permit is required for any proposed driveway intersecting an existing or proposed Township road.

HIGHWAY OCCUPANCY PERMITS: \$125.00

HOME OCCUPATION PERMITS: \$50.00

NO IMPACT HOME BASED BUSINESS PERMIT: \$50.00

RURAL OCCUPATION PERMIT: \$50.00

ZONING HEARING BOARD APPLICATION/UCC APPEAL FEE: \$650.00 per application

OLDS PROGRAM ADMINSTRATIVE FEE: \$25.00

***EXPEDITED FEES ARE DOUBLE THE COST** - For those who start construction before the permit is paid for and picked up.

SHORT TERM RENTAL FEES: \$600 start-up fee (initial), \$300 annually thereafter, \$1,000 if start-up is done without permit and approvals.



Associated Building Inspections 2022 – FEE SCHEDULE

COMMERCIAL FEES

Code enforcement services:

Individual inspections	\$105 (per inspection/ per hour)
Re-inspections.....	\$105 (per inspection/ per hour)
Plan review.....	\$150/hr (pro-rated quarterly after the first hr)
Administration Services.....	\$40/hr
Permit Courier	\$20
Emergency Inspections.....	\$210/hr/ per inspection
Expedited plan reviews.....	Double standard rate.
Legal proceedings/hearings.....	\$150/hr (pro-rated quarterly after the first hr)
Code Consultation services.....	\$150/hr (pro-rated quarterly after the first hr)
Pre-construction/site meetings.....	\$150/hr (pro-rated quarterly after the first hr)
Property Maintenance Code/Rental Property	\$75/hr/ per inspection (pro-rated quarterly after the first hr)
Illuminated signs.....	\$225 min. (additional inspections may be required)
Demolition.....	\$270 min. (additional fees may be required)
Solar.....	See solar fee schedule
Decks.....	\$105 per inspection
Commercial pools.....	see below table, line #4
Commercial Pools 3-Year D.O.H. Electrical Renewal*.....	\$250 (\$100 each additional pool)

*These fees may be adjusted due to the complexity of the inspection

Minimum Inspection fees:

Commercial renovations/alterations.....	\$735 *
Commercial New Construction/additions.....	\$945 *

*These fees may be adjusted based upon the simplicity or complexity of the project.

Standard commercial project calculations:

Plan review*.....	\$150/hr (pro-rated quarterly after the first hr)
Inspection fees*.....	Inspections are calculated using the table below. Determine the use group and type of construction and multiply that by the square footage of the proposed project.

*These fees may be adjusted based upon the simplicity or complexity of the project.

USE GROUP		Additions/ Alterations	New Construction
International Building Code Chapter 3 (Based upon ICC building construction valuation data)		Cost per sq. ft	Cost per sq. ft.
1	Assembly (see Section 303): Groups A-1, A-2, A-3, A-4 and A-5	\$.42	\$.51
2	Business (see Section 304): Group B	\$.40	\$.475
3	Educational (see Section 305): Group E	\$.41	\$.49
4	Factory and Industrial/ Pools (see Section 306): Groups F-1 and F-2	\$.35	\$.415
5	High Hazard (see Section 307): Groups H-1, H-2, H-3, H-4 and H-5	\$.36	\$.43
6	Institutional (see Section 308): Groups I-1, I-2, I-3 and I-4	\$.425	\$.54
7	Mercantile (see Section 309): Group M	\$.375	\$.445
8	Residential (see Section 310): Groups R-1, R-2, R-3, and R-4	\$.385	\$.46
9	Storage (see Section 311): Groups S-1 and S-2	\$.34	\$.40
10	Utility and Miscellaneous (see Section 312): Group U	\$.33	\$.385

If both renovations and new construction will take place combine the fees of the square footage based upon the use group. For a mixed-use group calculate the square footage of each use group. *These fees may be adjusted based upon the simplicity or complexity of the project.

Accessibility:

\$300 up to 10,000 square feet. Every 1000 square feet over 10,000 the fee shall be minimum plus \$30.*

*These fees may be adjusted based upon the simplicity or complexity of the project.

January, 6 2013

CONSOLIDATED COMMERCIAL FEE SCHEDULE**Commercial Inspection Fees**

The fee schedule for inspections is based upon the latest building valuation data report of square foot construction costs published by the ICC valuation service, with a regional modifier applied. Actual cost submitted to, and accepted by, the Municipality may also be used.

Large projects that require long term multiple inspections (progressive inspections) are calculated as follows:

Projects with a total construction cost of \$0.00 to \$499,999.99*

$$\begin{aligned} & \text{Total construction cost X .002 = insurance cost} \\ + & \text{Estimated length of project in weeks X \$50. = labor \& travel cost} \\ = & \text{Total} \\ \text{or} & \text{no less than \$30. Per trip based on scope and complexity of the project.} \end{aligned}$$

Projects with a total construction cost of \$500,000.00 to \$2,000,000.00*

$$\begin{aligned} & \text{Total construction cost X .002 = insurance cost} \\ + & \text{Estimated length of project in weeks X \$50. = labor \& travel cost} \\ = & \text{Total} \end{aligned}$$

Projects with a total construction cost of > \$2,000,000.00 to \$6,000,000.00*

$$\begin{aligned} & \$4000.00 + [(\text{Total construction cost} - \$2,000,000) \text{ X } .0009] = \text{insurance cost} \\ + & \text{Estimated length of project in weeks X \$45. = labor \& travel cost} \\ = & \text{Total} \end{aligned}$$

Projects with a total construction cost of > \$6,000,000.00 to \$10,000,000.00*

$$\begin{aligned} & \$7600.00 + [(\text{Total construction cost} - \$6,000,000) \text{ X } .0008] = \text{insurance cost} \\ + & \text{Estimated length of project in weeks X \$40. = labor \& travel cost} \\ = & \text{Total} \end{aligned}$$

Projects with a total construction cost of > \$10,000,000.00 to \$30,000,000.00*

$$\begin{aligned} & \$10800.00 + [(\text{Total construction cost} - \$10,000,000) \text{ X } .00075] = \text{insurance cost} \\ + & \text{Estimated length of project in weeks X \$40. = labor \& travel cost} \\ = & \text{Total} \end{aligned}$$

Projects with a total construction cost of > \$30,000,000.00 to \$50,000,000.00*

$$\begin{aligned} & \$25800.00 + [(\text{Total construction cost} - \$30,000,000) \text{ X } .0007] = \text{insurance cost} \\ + & \text{Estimated length of project in weeks X \$40. = labor \& travel cost} \end{aligned}$$

Commonwealth
Code Inspection
Service, Inc.

176 Doe Run Road
Manheim, PA 17545

Differed submittal plan reviews will be charged at 25% of the building plan review fee, but not less than \$150.00

A preliminary plan review is available for a fee of 50% of the full plan review fee cost. Preliminary plan review addresses such code requirements as: use and occupancy classification, type of construction, height and area calculations, means of egress, and fire restrictive construction requirements.

The preliminary plan review fee shall be credited towards the cost of a complete building code plan review conducted by Commonwealth Code Inspection Service, Inc.

CHECKS FOR PLAN REVIEW FEES SHALL BE MADE PAYABLE TO: Commonwealth Code Inspection Service, Inc. (CCIS).



**WEST COCALICO TOWNSHIP
YEAR 2018**

Section B - Commercial

1. Commercial, Industrial, Institutional Buildings
 - a. First \$1,000.00 of project cost* \$100.00
 - b. Each additional \$1,000.00 or part thereof \$6.05
 - c. Plan review and Accessibility plan review fee \$55.75 per hr
 - d. Accessibility inspections \$80.00 per inspection
 - e. Minimum building permit fee \$365.00
2. Review of revisions to previously approved plans \$55.75 per hr.
3. Additions, alterations, renovations, modification of existing buildings or
 - a. First \$1,000.00 of project cost* \$100.00
 - b. Each additional \$1,000.00 or part thereof \$6.05
 - c. Plan review and Accessibility plan review fee \$55.75 per hr.
 - d. Accessibility inspections \$80.00 per inspection
 - e. Minimum building permit fee \$365.00
4. Special Structures to include, but not limited to tower, storage tanks, cell tower, retaining walls (over 4' in height) and commercial signs \$150.00 plus review and inspection fees
 - a. Plan review \$55.75 per hr.
 - b. Inspection fee \$80.00 per inspection as determined by inspector



Section D – Plumbing, Mechanical and HVAC

1. Residential Inspection

- | | | |
|----|---|------------------------|
| a. | Any plumbing, mechanical and/or HVAC work not associated with a building permit and not exempted by the Uniform Construction Code Section 403.62 Permit Requirements and Exemptions shall require a permit. | \$60.00 per inspection |
| b. | Plan review | \$55.75 per hr. |
| c. | Re-inspection fee | \$60.00 |

2. Commercial Inspection

- | | | |
|----|---|-----------------|
| a. | Any plumbing, mechanical and/or HVAC work not associated with a building permit and not exempted by the Uniform Construction Code Section 403.62 Permit Requirements and Exemptions shall require a permit. | |
| b. | First \$1,000.00 of project cost* | \$100.00 |
| c. | Each additional \$1,000.00 or part thereof | \$6.05 |
| d. | Plan Review | \$55.75 per hr. |
| e. | Minimum building permit fee | \$250.00 |
| f. | Re-inspection | \$80.00 |

*The applicant for a permit shall provide an estimated project cost at time of application. Permit valuations shall include total value of work, including excavation for building, materials and labor, for which the permit is being issued, such as electrical, gas, mechanical, plumbing equipment and permanent systems. If, in the opinion of the building official, the valuation is underestimated on the application, the permit shall be denied, unless the applicant can show detailed estimates to meet the approval of the building official. Final building permit valuation shall be set by the building official.

Project Data	Number of stories above grade _____ Does it have a basement? <input type="checkbox"/> Yes <input type="checkbox"/> No Total floor area (sq. ft.) _____ Floor area new construction (sq. ft.) _____ Floor area of addition (sq. ft.) _____ Floor area renovated (sq. ft.) _____ Estimated cost of construction \$ _____ (Required -- even if project is state-owned and exempt from permit fees.) Type(s) of construction per Chapter 6 of the <i>International Building Code</i> (check all that apply): <input type="checkbox"/> IA <input type="checkbox"/> IB <input type="checkbox"/> IIA <input type="checkbox"/> IIB <input type="checkbox"/> IIIA <input type="checkbox"/> IIIB <input type="checkbox"/> IV <input type="checkbox"/> VA <input type="checkbox"/> VB Fire suppression: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None If application applies to an existing building that has been certified, indicate permits held: Fire and Panic Occupancy Permit <input type="checkbox"/> File Number: _____ L&I UCC Certificate of Occupancy <input type="checkbox"/> File number: _____
Building Code Data	Triennial ICC code version used for Building code compliance: _____ 2006 _____ 2009 If Alterations to existing certified building: (select applicable document used) _____ IBC Chapter 34 _____ International Existing Building Code
Accessibility Code Date	Triennial ICC code version for Accessibility code compliance/IBC Chapter 11 (select one) _____ 2006 _____ 2009 _____ 2012 (design contracts between Jan. 1, 2013 and March 31, 2016) _____ 2015 (design contracts starting April 16, 2016) If Alterations: (select one, either document may be used for projects under design contract prior to Jan. 1, 2013) _____ IBC Chapter 34 (2012 must be used to support accessible alterations under design between Jan. 1, 2013 and March 31, 2016) _____ International Existing Building Code (IEBC) (2015 must be used to support accessible alterations under design contract starting April 16, 2016)
Design Professional In Responsible Charge Seal must be in space to right of name & address.	Name _____ Address _____ PA License # _____ Email _____ Phone _____ Fax () _____ <div style="text-align: right;">SEAL</div>
Owner Information	Owner Name _____ Street Address _____ City _____ State _____ Zip Code _____ Phone () _____

Deferred Submissions

If you are installing any of the items listed below but are not submitting shop drawings for them at the time that you are submitting this application, check the appropriate box(es) below. See **Section Q** on the "Plan Review and Inspection" page on the UCC website for information about submitting these drawings at a later date.

Fire Alarm System Wood Roof Trusses (Certified) Sprinkler System

Fees:

List total sq. ft. of floor area: _____ List estimated construction cost: _____

If new building or addition: pay \$321.00 base fee \$ _____

Plus, pay \$.65 multiplied by total sq. ft. of floor area \$ _____

If new structure or facility (other than building): pay \$965.00 \$ _____

If alteration or renovation of existing building: pay \$321.00 base fee \$ _____

Plus, pay \$65.00 per each \$1000 of est. construction cost \$ _____

If accessibility only review: pay \$645.00 \$ _____

If phased approval: pay \$500.00 \$ _____

If revision of approved plans or partial occupancy request: pay \$500.00 \$ _____

TOTAL FEES OWED \$ _____

Make check or money order payable to **Commonwealth of Pennsylvania**.

Applicant's Certification:

Note: **THE BUILDING PERMIT AND THE CERTIFICATE OF OCCUPANCY FOR THIS BUILDING OR STRUCTURE WILL BE ISSUED TO AND IN THE NAME OF THE PERSON LISTED BELOW.**

As the owner or the authorized agent of the project for which this application is filed, I certify that:

1. The estimated construction cost and all other information provided as part of this application for a building permit is correct.
2. 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 Department of Labor & Industry.
3. 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.
4. Any changes to the approved documents will be filed with the Department of Labor & Industry.
5. If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to the Department of Labor & Industry.
6. When required, up to 20% of the total cost of any work performed on an area of primary function in an existing building will be expended to provide an accessible route to the area of primary function.
7. 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.

Applicant Name _____

Street Address _____

City _____ State _____ Zip Code _____

Phone (____) _____

Email _____

Applicant Signature _____ Date _____

UCC PLAN REVIEW CHECKLIST

This checklist must accompany permit applications for new buildings/structures, additions and renovation projects (those which exceed the scope of Alterations-Level 1)

ALL INFORMATION MUST BE FILLED IN, CHECKED OR MARKED "NA"

Project Name:	
Project Address:	
Owner/Agent:	Telephone:
Design professional or other person we can contact about info on this form and other project details (if same as Owner/Agent, just provide fax # and e-mail address):	Phone: _____ Fax: _____ Email: _____

General Requirements:

All drawings, shall be sealed, signed, and dated, by a design professional (licensed architect or engineer). The **only** exception is when **all** of the following apply:

- a) The proposed work only involves remodeling or alterations of an existing building or structure.
- b) The proposed work does not change the building's structure or means of egress.
- c) The person preparing the plans is not compensated for the preparation of the drawings.

All drawings must be neatly drawn with clean, crisp lettering — they must remain legible after reduction for microfilming.

Computer-generated vicinity maps obtained from web-based services (such as *MapQuest*) are acceptable, as long as the roadways or street names are legible and will remain that way after reduction for microfilming.

When photographs (including digital ones) are submitted to show building elevations, the images must be in focus and correctly exposed.

A Pennsylvania Department of Transportation (PennDOT) permit allowing access to a highway under its jurisdiction is not required at the time that application is made for a UCC building permit. **If the highway occupancy permit issued by PennDOT requires a location of the building/structure differing from that approved under the UCC building permit, applicants must send the department a letter requesting a determination whether a revision of approved plans will be required.**

While we understand that many items on this checklist may not be included in some alteration or renovation projects, we request that all applicants work through the entire checklist to ensure that any necessary items are included. If any item is **not necessary, please insert NA** ("not applicable"). This will greatly facilitate review and approval of projects.

- Three (3) sets of drawings** are included in this application package (**mandatory**).
- Four (4) site plans** are included in this application package (**mandatory**).
- One (1) set of specifications** is included in this application package (**mandatory**).

SITE PLANS:

- | | | |
|------------------------------|------------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Site plans shall be prepared to scale (not less than 1"=20'), with legend, north arrow, and separate vicinity (site location) map. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Show the correct street address, parcel number and required municipal zoning (if there is local zoning ordinance) on the site plans. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Show and identify all property lines and rights-of-way, with distance from property lines and adjacent buildings on site plans. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Show all accessible parking spaces and signage per ICC/ANSI A117.1 and the <i>International Building Code</i> on site plan. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Show accessible curb cuts, ramps and access ways to the building. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Show all existing and proposed driveway entrances. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Identify adjacent land uses and zoning. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Show all easements, flood ways, and required buffers. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show existing and proposed utilities (with backflow preventers) to serve the site. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Show existing and proposed finish grades. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Show details, sections, and elevations needed for construction. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. Show all buffer and screening landscaping. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. Show all required parking and loading spaces and calculations. |

ARCHITECTURAL PLANS:

- | | | |
|------------------------------|------------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | a. Show architectural floor plans of each floor. These pages must be at least 18" x 24" in size (but not more than 36" x 42"), drawn to a scale of not less than 1/8" = 1'. Indicate (or reproduce) the approved, tested hourly rating, number and location of all rated members and assemblies (walls, columns, beams, floor and ceiling, and ceiling and roof fire-rated design assemblies). Show all fire-rated walls (both existing and new) with their ratings, if not shown elsewhere. Drawings submitted without required fire-rated walls shown will be rejected. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | b. Show the square footage of each floor on the corresponding floor plans. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | c. Identify the names and uses of each room. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Furnish door schedule(s), including size, type, rating (if any) and hardware. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Provide all glazing schedules. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Show elevations with dimensions defining overall building height, floor-to-floor heights or heights to ridge and eave as applicable to the type of building construction listed on the UCC application. (Note: Where an existing building is involved, photographs of all sides of the building may be submitted to show elevations. These will be acceptable only if they show all elements necessary to determine compliance with the UCC.) |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Provide basement percentage-below-grade calculations. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Indicate roof slopes, drainage system and sized through wall scuppers, if applicable to the project. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show fixed seating for assembly occupancy to allow determination of occupancy posting required by <i>International Building Code</i> . |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Show wall sections with proposed material sizes, construction and fire-rated assemblies. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Show proposed plumbing fixtures and privacy screens on the plans. |

Yes N/A

l. If masonry construction is proposed, include the following information:

Type of brick ties and spacing of weep holes.

Placement of wall flashing and reinforcement.

Yes N/A

m. If appropriate for the proposed occupancy, plans should identify all hazardous material control areas, fire barriers and the required fire-resistance ratings for these barriers. All identified control areas shall list the name, class, quantity and method of storage of all hazardous materials processed, manufactured or used in a manufacturing process and contained within its fire barriers. Provide a Material Safety Data Sheet for each listed hazardous material. See sections 414 and 415 of the *International Building Code*

Yes N/A

n. Show the floor slab vapor barrier.

Yes N/A

o. Show foundation water-proofing, if applicable.

Yes N/A

p. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed the rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.

Yes N/A

q. Show penthouse drawings.

Yes N/A

r. Provide on the drawings the calculations for the means of egress widths for the entire floor occupancy load and the existing capacity of all exits including all stairs, doors, corridors and ramped exits.

Yes N/A

s. Show required ventilation louvers and vent sizes.

STRUCTURAL PLANS:

N/A

Yes N/A

a. Show foundation plans indicating the proposed slab elevations and type of foundation (i.e., mat foundation, caissons, spread footings, etc.).

Yes N/A

b. Provide preliminary soil analysis data done by a licensed engineer, if required.

Yes N/A

c. Indicate dimensions of foundations.

Yes N/A

d. Show type, size and location of piling and pile caps for pile foundation.

Yes N/A

e. Indicate grade beam sizes.

Yes N/A

f. Indicate a footing schedule defining footing sizes and the required reinforcing.

Yes N/A

g. Show the established footing depth below grade and method of frost protection allowed in the *International Building Code*.

Yes N/A

h. Indicate the thickness of the floor slab, size of reinforcing, slab elevations, and type and details of foundations.

Yes N/A

i. Indicate location, size and amount of reinforcing steel.

Yes N/A

j. Show foundation corner reinforcing bars and minimum overlapping (as applicable to project structure).

Yes N/A

k. Provide strength of concrete according to designed soil reports.

Yes N/A

l. Show beams, joists, girders, rafters, and/or truss layouts and details of connections, structural steel stud gage, gage size, and connections.

Yes N/A

m. Indicate the sizes and species of all wood members and their respective design strength.

Yes N/A

n. Show all columns, girders, joists, purlins, beams and base plates; for wood construction show all headers.

Yes N/A

o. Provide a complete lintel schedule.

Yes N/A

p. Indicate the type of anchoring for steel bearing directly on masonry.

- Yes N/A q. Indicate design dead and live, wind, snow, seismic loads for floor areas, roofs, balconies, porches, breezeways, corridors, stairs, mezzanines and platforms. Show concentrated loads, i.e. file rooms, machinery and forklift areas, if greater than those shown on the Code Summary Sheet. Identify shear walls, bracing, strapping fastening, reinforcement and any special anchoring required.
- Yes N/A r. Where applicable, indicate on roof framing plan where concentrated loads (mechanical equipment, cranes, etc.) will be placed.
- Yes N/A s. Indicate on foundation and framing plans the location and lateral load resisting system. (Show walls, braced frames, moment connections, etc.)

FIRE PROTECTION PLANS:

N/A

- Yes N/A a. Complete a sprinkler design data sheet and include it on the first plan of the sprinkler drawings.
- Yes N/A b. Show floor plans for each floor with sprinkler piping layout, pipe sizes, pipe hanger details, piping materials, doors, walls and room identities. Often, these shop drawings are not available at the time of initial plan submission. If this is the case, write in "NA," but note the following:
- These shop drawings must be submitted for department review and approval **at least two weeks before the projected installation date.**
 - Failure to obtain approval of these drawings before installation could result not only in delay of the final inspection and issuance of an occupancy permit, but also in removal and reconstruction of installations which fail to meet UCC requirements.
- Yes N/A c. Show ceiling plans with sprinkler head(s) layout, walls, soffits, openings, doors, dimensions and room identities.
- Yes N/A d. Verify system design by providing hydraulic calculations along with the following:
- Recent water flow test
 - Percent safety margin
 - Type of backflow-preventer or reduced pressure zone showing equivalent foot loss
 - Fire pump summary
- Yes N/A e. Note the type of sprinkler system used (e.g., 13, 13D, or 13R)
- Yes N/A f. For residential occupancies such as apartments and condominiums, show sprinkler head locations at breezeways, if applicable.
- Yes N/A g. Indicate the certified testing laboratory agency (e.g., U.L.), their test number and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere.
- Yes N/A h. All penetrations of fire-rated construction must be per manufacturer's details. Details shall meet or exceed ratings of construction being penetrated. The penetration details shall be exactly as tested by a certified testing laboratory or agency and shall include their system numbers. All new penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
- Yes N/A i. Provide a fire alarm riser showing connection to a UL-approved central station. Show tamper switches on both OS and Y valves of backflow prevention device, unless shown elsewhere.
- Yes N/A j. Indicate commodity class (per section 2303 of the *International Fire Code*) and height of any storage.
- Yes N/A k. Provide Material Safety Data Sheets for any hazardous materials (also specified under "**ARCHITECTURAL PLANS**").

- Yes N/A
- i. Where special temperature-rated or high-temperature sprinklers are required, show sprinkler type(s) per area, office size, cut sheets with K-factor, water requirements, spray pattern, coverage and other pertinent data.

SYSTEM CALCULATIONS (FIRE PROTECTION): N/A

- Yes N/A
- Yes N/A
- a. Flow and pressure at each flowing sprinkler head.
- b. Flow diagram for a grid system.

PLUMBING PLANS: N/A

- Yes N/A
- Yes N/A
- a. Show a site utilities plan, if not provided with the civil drawings.
- Show the domestic water, fire, and irrigation services.
- Show the location of water meters, backflow protection type and location.
- Show the sanitary sewer service from building to public sewer or approved private sewage disposal system.
- Yes N/A
- b. Show interceptors as applicable to project and size by flow rate. (i.e., grease, oil, lint, acid, sand).
- Yes N/A
- c. Provide plumbing plan layouts for each floor. These should show the water distribution and drain-waste-vent piping, and all details, notes, legends, and schedules necessary to define the system being installed.
- Yes N/A
- Yes N/A
- d. Show the location of all major components required for a complete system.
- e. Provide fixture and equipment schedule showing fixture number, detailed description, hot water, cold water, waste and vent connection sizes and other pertinent data.
- Yes N/A
- f. Identify all fixtures on floor plans and in riser diagrams with the plumbing fixture schedule number.
- Yes N/A
- g. Supply and Waste/Vent piping shall be shown on the floor plans. All pipe sizes shall be clearly shown. In congested areas (e.g., restaurants, grocery stores, etc.), isometrics are required.
- Yes N/A
- h. On buildings two stories and above, provide isometric diagrams and/or schematic riser diagrams for Supply and Waste/Vent piping and identify the risers by number (e.g., R1, R2, etc.). Show where all riser base terminations connect to the building drain, along with all interconnected piping on each floor plan. All pipe sizes shall be clearly defined.
- Yes N/A
- i. Show the water, sanitary drain-waste-vent piping and storm leaders/drains. Indicate sizes and materials for above/below grade.
- Yes N/A
- j. Show slope of horizontal sanitary and storm drains that equal or exceed 3" diameter, if less than 1/8" per foot.
- Yes N/A
- k. Indicate roof drains and emergency roof drains/scuppers with the areas they impact. Note that "emergency" = "secondary" = "overflow"; see following roof drainage examples:
- Roof Drain - 6" RD (16880 SF)
 - Emergency Roof Drain - 6" ERD (8180 SF)
 - Parapet Wall Scupper - 8" x 5" WS (4000 SF)
 - Emergency Scupper - 8" x 7" ES (4200 SF)
- Yes N/A
- Yes N/A
- Yes N/A
- l. Show toilet room layouts with minimum of 1/4" = 1 foot scale.
- m. Show drinking fountain locations.
- n. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- o. Room names and numbers for each floor should be on a floor plan for each level.
- p. Provide minimum facilities calculations.
- q. Column line notations, if provided on the architectural/structural plans, shall be indicated on the plumbing plans.

MECHANICAL PLANS:

N/A

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- a. Show all required wall louvers, penetrations and fans.
- b. Indicate roof-mounted equipment locations.
- c. Show all mechanical equipment, piping, ductwork (above/below slab) on the mechanical floor and/or roof plan.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- d. Provide mechanical plans for each floor and the roof. These shall show the ductwork layouts, schedules, notes, legends, piping schematics, and details necessary to define the system being installed.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- e. Indicate air distribution devices and show cfm for all supply, return and exhaust devices.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- f. Indicate the location of all equipment components required for a complete system.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- g. Show the smoke ventilation of atriums and pressurization of high-rise stairwells.
- h. Show condensation drains, primary and secondary, from the unit to the point of discharge.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- i. Indicate toilet exhaust requirements.
- j. Show mechanical room layouts at sufficient scale for dimensions and details to be ascertained.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- k. Show the size of duct runs.
- l. Indicate controls for fan shutdown: emergency manual and automatic smoke detection

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- m. Show the location of all UL 555-certified fire dampers, ceiling radiation dampers, smoke dampers, and fire doors.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- n. Show all fire-rated walls (both existing and new) with their ratings on the mechanical plans.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- o. All penetrations of fire-rated construction must be per manufacturer's details.
- p. Room names and numbers for each floor should be on a floor plan for each level.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A

- q. Provide outside air ventilation rate per the *International Mechanical Code*.
- r. Column line notations, if provided on the architectural/structural plans, shall be identified on the mechanical plans.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- s. Provide gas piping layout on the floor plan for each floor. If it is a multi-story building, all gas piping shall be shown per floor. Include pipe sizes, water column, and type of material. Provide a schedule of connected equipment, total BTUH demand, total equivalent length, and most remote gas appliance.

ELECTRICAL PLANS:

N/A

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- a. Provide panel schedules with circuit and feeder loading, overcurrent protection, and NEC load summaries for all new and/or affected panels and services (loading has to be evaluated by highest phase); include fault current data, short circuit ratings and fault current protection coordination.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- b. Provide a single line riser diagram showing all new and/or affected services, feeders, wire sizes and insulation types, and conduit sizes and types.

<input type="checkbox"/>	Yes	<input type="checkbox"/>	N/A
--------------------------	-----	--------------------------	-----

- c. Indicate number of services and their physical locations; clearly indicate mains and characteristics.

- | | | |
|------------------------------|------------------------------|--|
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | d. Indicate the grounding electrode conductor size with new and/or affected services and transformers; where necessary provide details or notes on methods. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | e. Show physical locations of all new and/or affected panels and switchgear (indicate front). |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | f. Indicate receptacle plans with circuitry. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | g. Indicate lighting plans with circuitry. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | h. Show electrical plans for each affected floor, including the roof. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | i. Show wiring method(s), conduit sizes and types, termination temperature (60, 75, 90) requirements, conductor sizes and insulation types. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | j. Indicate the design and/or operation for any of the following applicable life safety systems: emergency generators, smoke evacuation, shaft pressurization and relief, smoke detection, egress and emergency lighting, and fire alarms. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | k. Indicate how special needs such as classified (hazardous), corrosive and patient care are treated. Provide detailed plan of classified areas, the classifications and how complied with (i. e. hangers, waste treatment and collection, flammable dusts, gases or liquids, spray booths, vehicle servicing and parking, etc.). |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | l. Provide all HVAC nameplate data, including MCA and MOCP. List all other appliance and/or equipment (other than those which will be connected to a general use receptacle) with nameplate data (i.e., voltage, phasing, HP, KVA, FLA, RLA, etc.). |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | m. Indicate all motor horse power ratings, if not supplied elsewhere. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | n. Indicate the certified testing laboratory or agency (e.g., UL), their test # and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling, and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | o. All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed ratings of construction being penetrated. Penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | p. Provide all applicable <i>International Energy Conservation Code</i> compliance data on the Building Code Summary sheet or on the electrical plans. |
| <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | q. All submittals should include a listing and labeling statement. (All electrical materials, devices, appliances and equipment shall be labeled and listed by a certified testing laboratory or agency.) |

Uniform Construction Code (UCC)
ENERGY CODE PRESCRIPTIVE COMPLIANCE REPORT

PROJECT INFORMATION

Project Name: _____ Street Number and Name: _____ City: _____ Zip Code: _____ Political Subdivision: _____ County: _____	IECC Climate Zone <input type="checkbox"/> Zone 10B <input type="checkbox"/> Zone 11B <input type="checkbox"/> Zone 12A <input type="checkbox"/> Zone 12B <input type="checkbox"/> Zone 13B <input type="checkbox"/> Zone 14A <input type="checkbox"/> Zone 15	ASHRAE/IESNA 90.1 Climate Zone <input type="checkbox"/> Zone 4A <input type="checkbox"/> Zone 5A
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PROJECT DESCRIPTION

Building floor area: _____ square feet

New construction Addition (conditioned) Alteration
 Unconditioned shell Unconditioned addition

If using ASHRAE/IESNA 90.1 prescriptions, indicate if Semi-heated Space or if Cooled Space

APPLICABLE STANDARDS

Check which standards will be used for each component listed below.

	<i>IECC CHAPTER 8</i>	<i>ASHRAE/IESNA 90.1</i>
Building Envelope	<input type="checkbox"/>	<input type="checkbox"/>
Mechanical Systems	<input type="checkbox"/>	<input type="checkbox"/>
Electrical/Lighting Systems	<input type="checkbox"/>	<input type="checkbox"/>

If no Building Envelope box was checked above, please indicate why the building envelope is exempt from the energy conservation requirements:

Peak design rate of energy usage will be less than 3.4 Btu/h/sq.ft.
 Building or structure will be neither heated nor cooled.

Attach either the IECC Chapter 8 or the ASHRAE/IESNA "Prescriptive Report" for each of the components checked above.

File No.	_____
Date	_____
UC3	

IECC BUILDING ENVELOPE CHECKLIST (requirements that will also be checked during inspection process):

- All joints and penetrations caulked, gasketed, weather-stripped, or otherwise sealed.
- Windows, doors, and skylights certified as meeting leakage requirements.
- All component R-values and U-factors labeled as certified.
- Stair, elevator shafts, vents and other dampers integral to building envelope are equipped with motorized dampers. (Gravity dampers may be used in buildings less than 3-stories in height.)
- Cargo/loading dock doors weather sealed.
- Recessed lighting fixtures installed per Section 802.3.7
- Vestibule provided at building entrances, with self-closing doors.
- Vapor retarder installed.

File No. _____

Date _____

UC3

IECC Building Mechanical Systems & Service Water Heater Requirement Checklist (requirements that will also be checked during inspection process):

- Load calculations per *ASHRAE Fundamentals Handbook-2001*.
- Plant Equipment and system capacity not greater than needed to meet loads.
- Minimum one temperature control device per zone.
- Stair and elevator shaft vents are equipped with motorized dampers
- Discharge dampers prohibited on constant volume fans & variable volume fans with motors >25hp.
- Balancing and pressure test connections on all hydronic terminal devices.
- Single-duct Variable Air Volume (VAV) terminals reduce primary air before reheating.
- Dual-duct (VAV) mixing boxes installed to minimize mixing.
- Controls capable of resetting supply air temperature (SAT) by 25% of SAT-room temperature difference.
- Minimum one humidity control device per installed humidification/dehumidification system.
- Automatic Controls: Setback to 55 degrees F (heat) & 85 degrees F (cool)
- Outside air supply and exhaust ducts equipped with gravity or motorized dampers with automatic shut off.
- Duct insulation: R-5 unconditioned spaces, R-8 outside building, R-8 between duct and exterior envelope.
- Duct construction per *International Mechanical Code (IMC)*.
- Balancing devices provided in accordance with IMC.
- Minimum pipe insulation per Table 803.3.
- Heat traps in inlet/outlet fittings for service water heating.
- Pipe insulation for Service Water Heating per Section 804.5
- Water temperature controls: 110 degrees F for dwelling units, or 90 degrees F for other occupancies.
- Hydronic three-pipe systems not used.
- Operation and maintenance manual provided to building owner.

File No.	_____
Date	_____
UC3	

ASHRAE/IESNA 90.1 Prescriptive Report: Electrical Power & Lighting Systems

Fill in all the requested information for either the entire building method or the tenant portion/portion of the building method.

Entire Building Method:

Building Use or Area Type from Table 9.3.1.1: _____
 Total Area of the Building (Sq.Ft.): _____
 Total Interior Light Power (Watts): _____

Tenant Area or Portion of Building Method:

Tenant Area/ Building Portion	Use From Table 9.3.1.2, in Addendum G	Total Area Sq. Ft.	Total Interior Lighting Power (Watts)

ASHRAE/IESNA 90.1 Electric Power & Lighting Requirements Checklist (requirements that will also be checked during inspection process):

- Minimum Efficacy of 60 lumens/watts for lamps greater than 100W used for exterior lighting.
- Lighting power for freestanding canopy areas for building entrances with canopies less than or equal to 3 watts per square foot.
- Lighting power for building entrances without a canopy less than or equal to 33 watts per linear foot of exterior door width.
- Lighting power for buildings exits less than or equal to 20 watts per linear foot of exit door width.
- Lighting power for building facades less than or equal to 0.25 watts per square foot of the illuminated area.
- Independent manual or occupancy sensing controls for each space (remote switch with indicator allowed for safety or security).
- Automatic shutoff control for lighting in > 5000 sq.ft. buildings by time-of-day device, occupant sensor or other automatic control.
- Master switch at entry to hotel/motel guest room.
- Photocell/astronomical time switch on exterior lights (except areas requiring lighting during daylight hours).
- Tandem wired one-lamp and three-lamp ballasted luminaires (except high-frequency ballasts; luminaires not on same switch).
- Feeder conductors have been designed for a maximum voltage drop of 2 percent.
- Branch circuit conductors have been designed for a maximum voltage drop of 3 percent.

ASHRAE/IESNA 90.1 Prescriptive Report: Building Envelope (Continued)

Fenestration (list each type of assembly used per table 5.3)

List Building Envelope Option: Residential Non-residential Semi-heated	% Vertical Glazing	SHGC Multiplier	Assembly Max. U	SHGC North	SHGC All

Skylights (list each type of assembly used per table 5.3)

List Building Envelope Option: Residential Non-residential Semi-heated	Type	% of Roof	Assembly Max.	SHGC Max.

ASHRAE/IESNA 90.1 Building Envelope Requirements Checklist (requirements that will also be checked during inspection process):

- Open-blown or poured loose-fill insulation has not been used in attic roof spaces with ceiling slope greater than 3 in 12.
- Wherever vents occur, vents are baffled to deflect incoming air above the insulation.
- Recessed lights, equipment and ducts are not affecting insulation thickness.
- No roof insulation is installed on a suspended ceiling with removable ceiling panels.
- All exterior insulation is covered with protective material.
- Cargo and loading dock doors are equipped with weather seals.
- Windows & skylights are labeled & certified by the manufactures for U-factor & SHGC.
- Fixed windows & skylights unlabeled by manufacturer have been site labeled using the default U-factor & SHGC.
- Other unlabeled vertical fenestration, operable and fixed, not labeled by the manufacturer, has been site labeled using the default U-factor and SHGC.
- All joints & penetrations are caulked, gasketed, weather-stripped, or otherwise sealed.
- Windows, doors, and skylights certified as meeting leakage requirements.
- Components R-values & U-factors labeled as certified.
- Building entrance doors have a vestibule and equipped with closing devices.

File No. _____

Date _____

UC3

ASHRAE/IESNA 90.1 Mechanical Systems (Simple) Requirements Checklist (continued)

- Dampers automatically shut on systems greater than 300 cfm.
- Optimum start controls supplied on systems with capacities greater than 10,000 cfm.

ASHRAE/IESNA 90.1 Service Hot Water Systems Requirements Checklist (requirements that will also be checked during inspection process):

- Service Hot Water Piping Insulation meets 7.2.3
- Temperature maintenance automatic time switches installed (7.2.4.2)
- Outlet temperature controls installed (7.2.4.4)
- Circulating pump controls installed (7.2.4.4)
- Storage temperature controls installed (7.2.4.1)
- Heat traps installed (7.2.6)

File No.:	_____
Permit No.:	_____
Date:	_____

**Uniform Construction Code
SPECIAL INSPECTIONS AND OBSERVATIONS STATEMENT**

This statement must accompany permit applications for all construction for which special inspections and observations are required in Chapter 17 of the International Building Code 2009 (IBC)	
Project name:	_____
Project address:	_____
Owner:	_____
Telephone:	_____

This is to certify that all the inspections and observations that I have checked on pages 2-3 and on page 4 of this statement are required for the project named above and will be performed by the designated individuals or firms. By signing this statement, I also acknowledge that:

- these inspections and observations must be performed by competent individuals in accordance with the requirements of the IBC Chapter 17 (as applicable) and that the construction work must comply with the department-approved plans and specifications and all applicable provisions of the uniform construction code;
- records of all required special inspections and testing observations (including any discrepancies and methods of correction of these discrepancies) will be retained and made available to department representatives, upon request; and,
- the final report section of this statement must be signed by me and a copy of this statement submitted to the department inspector, at the time that the final inspection is performed and before a certificate of occupancy is issued.

Name of Design Professional in Responsible Charge

Affix Seal Here

Signature of Design Professional in Responsible Charge

PA License Number

_____/_____/_____
Date signed (Month/day/year)

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	CREDENTIALS (Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	Inspection of fabricators		
<input type="checkbox"/>	Inspection of steel construction		
<input type="checkbox"/>	Inspection of concrete construction		
<input type="checkbox"/>	Inspection of masonry construction		
<input type="checkbox"/>	Inspection of wood construction		
<input type="checkbox"/>	Inspection of soil conditions		
<input type="checkbox"/>	Inspection of driven deep foundations		

CHECK EACH THAT APPLIES	TYPE OF SPECIAL INSPECTION OR OBSERVATION	NAME AND ADDRESS OF INDIVIDUAL AND/OR FIRM PERFORMING INSPECTION OR OBSERVATION	CREDENTIALS (Enter acronym from page 4. If "Other," please specify special training or basis for competency to perform work.)
<input type="checkbox"/>	Inspection of cast-in-place foundations		
<input type="checkbox"/>	Inspection of helical pile foundations		
<input type="checkbox"/>	Inspection of vertical masonry foundation elements		
<input type="checkbox"/>	Inspection of sprayed fire-resistant materials		
<input type="checkbox"/>	Inspection of mastic & intumescent fire-resistant coatings		
<input type="checkbox"/>	Inspection of exterior insulation & finish system (EIFS)		
<input type="checkbox"/>	Inspection of smoke control system		
<input type="checkbox"/>	Structural observations		

FINAL REPORT

Required special inspections or observations:

- Inspection of fabricators
- Inspection of steel construction
- Inspection of concrete construction
- Inspection of masonry construction
- Inspection of wood construction
- Inspection of soil conditions
- Inspection of driven deep foundations
- Structural observations

- inspection of cast-in-place deep foundations
- Inspection of helical pile foundations
- Inspection of vertical masonry foundation elements
- Inspection of sprayed fire-resistant materials
- Inspection of mastic and intumescent fire-resistant coatings
- Inspection of exterior insulation & finish system (EIFS)
- Inspection of smoke control system

I certify that I have reviewed the report on each of the inspections or observations checked above. These reports indicate that the covered work is in compliance with the department-approved plans and specifications and all applicable provisions of the uniform construction code.

Signature of Design Professional in Responsible Charge: _____

Date signed: _____

_____/_____/_____
(Day/month/year)

KEY for use in **CREDENTIALS** column:
(on pages 2, 3 and 4)

ACI	American concrete institute certified concrete field testing technician
AWS	American welding society certified welding inspector
ASNT	American society of non-destructive testing
AWCI	Association of wall and ceiling industries
MCA	Model code agency (ICC, BOCA, SBCCI, ICBO) special inspection certification
PA	Professional architect (currently licensed)
PE	Professional engineer (currently licensed)
OTHER	Specialized training coursework or other basis for competency deemed acceptable

Department of Labor & Industry | Bureau of Occupational & Industrial Safety | Building Plan Review Division
 651 Boas Street | Room 1600 | Harrisburg, PA 17121-0750 | 717.787.3806 options 1, 6 | Fax 717.783.5002 | www.dli.pa.gov
*Auxiliary aids and services are available upon request to individuals with disabilities.
 Equal Opportunity Employer/Program*