

NON-RESIDENTIAL BUILDING & ZONING PACKAGE



Township of O'Hara



**TOWNSHIP OF O'HARA
NON-RESIDENTIAL BUILDING PERMIT APPLICATION**

1. LOCATION OF PROPERTY

Development Name _____ Street # _____ Street Name _____ Suite # (If applicable) _____

2. DESCRIPTION OF BUILDING/STRUCTURE TO BE CONSTRUCTED _____

3. TYPE OF PERMIT(S) REQUESTED:
(CHECK ALL THAT APPLY) BUILDING MECHANICAL DEMOLITION FIRE PROTECTION

4. CHECK ONE OF THE FOLLOWING THAT APPLY:
 New Non Residential Structure Interior Alterations of existing tenant space
 Interior Build-out of new space Footer/Foundation Only

5. SPECIAL INSPECTIONS REQUIRED - CHECK ALL THAT APPLY:
 SOILS BOLT TIGHTENING
 CONCRETE EIFS
 WELDING ELEVATOR
 BOILER MISCELLANEOUS _____

6. ESTIMATED COST OF CONSTRUCTION \$ _____

7. _____
(OWNER NAME)

(Street Address)

(City, State, & Zip Code)

(Phone) (Fax)

(Email)

8. _____
(CONTRACTOR/COMPANY)

(Street Address)

(City, State, & Zip Code)

(Phone) (Fax)

(Email)

9. _____
(ENGINEER/ARCHITECT NAME)

(Street Address)

(City, State & Zip Code)

(Phone) (Fax)

(Email)

10. WORKER'S COMPENSATION CERTIFICATE PROVIDED WITH THIS APPLICATION YES NO
APPLICANT IS EXEMPT (NO EMPLOYEES - EXEMPTION FORM COMPLETED W/APPLICATION) YES NO

11. I hereby acknowledge the information contained herein is true and correct, and I hereby agree that all applicable provisions of the O'Hara Township Codes shall be complied with.

APPLICANT'S SIGNATURE

DATE

PRINT NAME

E-MAIL ADDRESS



TOWNSHIP OF O'HARA PROPOSED USE APPLICATION NARRATIVE

Please print all information

Complete the below proposed use narrative and submit with building permit application.

- Business name _____
- Exact nature of business _____
- Days of business _____
- Hours of business operation _____
- Number of employees _____
- Materials/products/supplies used in conjunction with business _____
- List hazardous materials used or manufactured (MSDS sheets are required)

- Does the business operation require reporting to the U.S. EPA? Yes No
- Address of business main office _____
Phone number _____
- Alarm system Burglar _____ Fire _____
- Monitoring Company _____
Address _____
Phone _____
- Contact Person** _____
- Emergency contact name** _____ **Phone number** _____
- Gross square footage of tenant space _____



TOWNSHIP OF O'HARA FIRE PREVENTION SURVEY

DATE _____

Name of Establishment _____ Location _____

Address _____ Suite # _____

Business phone _____

Nature of Business _____

Emergency contact _____
(Name) _____ (Home Phone #) _____

Keyholder

Occupant _____ (Cell Phone#) _____

Emergency contact _____
(Name) _____ (Home Phone #) _____

Keyholder

Occupant _____ (Cell Phone#) _____

ICC type of Construction _____

Roof materials _____

Number of stories _____ Number of floors _____ Basement (yes/no) _____

Length of building _____ Width of building _____ No. of elevators _____ No. of Stairways _____

Use Group _____

Notes to Fire Department _____

Fire Protection Equipment:

Automatic Sprinkler System Full Partial None

Number of risers _____ Type of system: Wet _____ Dry _____ Combination _____

Fire Department Connection (yes/no) _____ Size and type of connection _____ Location _____

Standpipes & Hose Cabinets (yes/no) _____ Location _____

Fire Alarm System (yes/no) _____ Smoke Detectors Heat Detectors

Pull Stations Duct Detectors

Fire Alarm Panel Location: Remote Panel _____
Main Panel _____

Facilities with cooking appliances:

Hood provided (yes/no) _____ Automatic Hood suppression provided (yes/no) _____

Last test date of hood suppression system: _____

Utilities:

Electric _____ Panel Location _____

Gas _____ Shut off Valve Location _____

Water _____ Shut off Valve Location _____

Hazardous Materials Stored/Processed? YES NO

Building Placarded? YES NO

Explosive Materials? YES NO

If yes, what type? _____

Flammable liquids (i.e.: Gal. Above ground) _____

Flammable liquids (i.e.: Gal. Below ground) _____

List of Hazardous Materials:

_____ Quantity _____

_____ Quantity _____

_____ Quantity _____

Provide complete list for additional items. Check here if additional list is provided

Knox Box provided (yes/no) _____ If yes, list location of box _____

(FOR TOWNSHIP USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE)

- Site plan provided on 8 ½ x 11 sheet
- Floor plan layout provided on 8 ½ x 11 sheet
- Fire Prevention Survey complete
- MSDS Sheets provided for HAZMAT
- Locations of Knox Box, Fire Alarm panels, sprinkler valves, fire hydrants, etc. on plans.

Permits required: _____

COMMERCIAL BUILDING PLAN REVIEW PROCEDURE

- Completed building permit application.
- Two (2) complete sets of building plans and specifications which have been approved by O'Hara Township's contracted Plan Review Agency.
- All construction documents required for a building permit shall be prepared by a registered design professional consistent with the professional registration laws of the state of Pennsylvania.
- When the proposed work is minor in nature and has no effect on the structural integrity of an existing building, and is in compliance with all other provisions of this code and have been approved by the Building Official plans need not be prepared by a licensed engineer, or registered architect provided such plans are drawn to scale and contain sufficient detail and clarity that the work will be of sound construction and in compliance with the provisions of this code.
- Upon receipt of submittal, the Township will perform an administrative review of the submission for completeness.
- Permit applicant shall provide written responses, item by item, for review comments and revise plans and specifications to meet code compliance.
- Applicant shall submit two (2) complete sets of revised plans, specifications and written response to plan review comments.
- Township may require new or revised structural calculations to be submitted for review if necessary to determine code compliance.
- If plan review comments are minor in content and require no plan or specification revisions, then the applicant may provide a written response from the plans and specification preparer for the comments.
- Once it has been determined by the Township that the plans and specifications are code compliant, the plans and specs are stamped approved and one set of documents for construction are returned to applicant with building permit issuance. These approved plans must be retained on-site as a reference for construction.

CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND SPEED* (mph)	SEISMIC DESIGN CATEGORY	SUBJECT TO DAMAGE FROM				WINTER DESIGN CATEGORY	ICE SHIELD UNDER-LAYMENT REQUIRED	FLOOD HAZARDS	AIR FREEZING INDEX	MEAN ANNUAL TEMP
			WEATHERING	FROST LINE DEPTH	TERMITE	DECAY					
25	90	A	SEVERE	36"	MOD/HVY	SLT/MOD	0-20	YES	FEMA	1500 OR LESS	50



Township of O'Hara

REQUIRED NON-RESIDENTIAL INSPECTIONS

48 HOURS NOTICE IS REQUIRED!

Please call the inspection scheduling line at (412) 782-1400.

- _____ A. **FOOTER:** prior to concrete pour when rebar is in place.
- _____ B. **FOUNDATION:** made after foundation is constructed and prior to backfilling.
- _____ C. **CONCRETE FLOORS:** prior to concrete pour.
- _____ D. **REINFORCED MASONRY - as block or poured concrete walls are prepared and after steel reinforcement is installed.**
- _____ E. **STEEL: after erection and installation is complete.** (Special inspection required)
- _____ F. **ELECTRICAL, SERVICE, ROUGH WIRING AND FINAL:** performed by the Township Inspection Agency.
 - _____ SERVICE CONNECTION
 - _____ ROUGH WIRE
 - _____ FINAL ELECTRICAL
- _____ G. **ROUGH FRAMING:** prior to closing in and concealment of framing.
- _____ H. **GREASE TRAP:** Visual
- _____ I. **ENERGY CONSERVATION**
- _____ J. **PLUMBING AND MECHANICAL ROUGH-INS:** prior to concealment. (ABOVE GROUND)
- _____ K. **FIRE BLOCKING AND DRAFTSTOPPING:** when completed.
- _____ L. **FIRE LINE:** Visual and hydrostatic test of all pipe, valves and hydrants from tee or valve to double check backflow prevention device. Hydrostatic testing performed by contractor.
- _____ M. **FIRE PROTECTION AND FIRE DETECTION SYSTEMS:** shall be witnessed by O'Hara Township. All Fire Protection/Detection/Suppression systems that are taken out of service must be reported to 412-782-1400.
- _____ N. **FINAL SEWER & WATER:** Final site inspection of meter spread, remote meter, curb box, valve box, manhole, and fire hydrants. Final inspection from Allegheny County Health Department must be presented. (All sanitary and storm sewer taps must be witnessed by O'Hara Township).
- _____ O. **FINAL & ACCESSIBILITY: walk-through inspection is made after construction is completed, final electrical inspection verified, and structure is made ready for occupancy.**
- _____ P. **ADDITIONAL INSPECTIONS MAY BE REQUIRED AS CONSTRUCTION PROGRESSES.**

Also, please have copies of all third party inspections such as concrete cylinder testing, welding inspections, soils testing reports, and on site erection/installation inspection approvals sent to O'Hara Township.

Please note that the above listing is for reference and that all work performed must comply with all Township codes and approvals, and State and Federal requirements.

Signature _____

Date _____

Addendum to Building Permit

- I. The applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):
- Certificate of Insurance (please attach)
 - Certificate of Self-Insurance (please attach)
 - Affidavit of Exemption
- II. If an exemption is being claimed, please complete the following; and sign in the presence of a notary public:

Basis for exemption (check one):

- Applicant is an individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act. Please explain:

- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain:

- Other - Please explain:

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip Code _____

Applicant's federal or state employer identification number (EIN): _____

1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

COMMONWEALTH OF PENNSYLVANIA)

COUNTY OF ALLEGHENY)

On this _____ day of _____, 20____,
before me, _____, notary public, the
undersigned personally appeared _____

know to me (or satisfactorily proven) to be the person(s) whose
name(s) is/are subscribed to the within instrument, and
acknowledged that he/she/they executed the same for the
purposes therein contained.

In witness whereof, I hereunto set my hand and official seals.

Notary Public

My signature on behalf of or as the contractor/applicant for
this building permit constitutes my verification that the
statements contained here are true, and that I am subject to
the penalty of 18 Pa. C.S.A. §4904 relating to unsworn
falsifications to authorities.

Signature

Name (Please Print)

Title

Name of Company

Pennsylvania League of Cities and Municipalities
Note: Applicant's Copy to be attached to permit and posted.
Municipality's Copy to be filed with its permit copy.

MUST BE SIGNED IN THE PRESENCE OF NOTARY.

THIS FORM MUST BE SIGNED BY THE OWNER OF THE PROPERTY

PERMIT AGREEMENT

In consideration of the issuance by the Township of O'Hara (the "Township") of a building or grading permit to the undersigned applicant (the "Applicant"), the Applicant acknowledges that, in reviewing plans and specifications, in issuing permits, and in inspecting work of the Applicant, employees of the Township are only performing their duties to require compliance with the minimum requirements of the applicable ordinances of the Township pursuant to the police power of the Township, and are not warranting to the Applicant or to any third party the quality or adequacy of the design, engineering or work of the Applicant. Applicant further acknowledges that it will not be possible for the Township to review every aspect of Applicant's design and engineering or to inspect every aspect of Applicant's work. Accordingly, neither the Township nor any of its elected or appointed officials or employees shall have any liability to the Applicant for defects or shortcomings in such design, engineering or work, even if it is alleged that such defects or shortcomings should have been discovered during the Township's review or inspection.

Furthermore, the Applicant agrees to defend, hold harmless and indemnify the Township, its elected and appointed officials and employees from and against any and all claims, demands, actions and causes of action of any one or more third parties arising out of or relating to the Township's review or inspection of the Applicant's design, engineering or work or issuance of a permit or permits, or arising out of or relating to the design, engineering or work done by Applicant pursuant to such permit or permits. All references in this Agreement to Applicant include Applicant's employees, agents, independent contractors, subcontractors or any other persons or entities performing work pursuant to the issuance of the building or grading permit by the Township.

Property Owner Signature

Building Permit No./Job Location

Date Permit Issued/Type of Work

Grading Permit No.

Date Permit Issued

THIS SIGNED FORM IS TO BE RETURNED TO THE TOWNSHIP OFFICE FOR RECORD