# MOSHANNON VALLEY COUNCIL OF GOVERNMENTS

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SUITE 7

CLEARFIELD, PA 16830

8 1 4 - 7 6 5 - 3 0 8 0

#### 1. ITEMS TO SUBMIT:

- A. COMPLETED AND SIGNED APPLICATION
- B. SIGNED PRIOR MUNICIPAL APPROVAL PAGE
- C. TWO (2) SETS OF PLANS
- D. ANY OTHER ITEM(S) LISTED ON THE SUBMITTAL HANDOUT CHECKLIST
- 2. GET PRIOR APPROVAL FORM SIGNED BY THE MUNICIPALITY IN WHICH THE WORK WILL BE DONE.
- 3. PLEASE PROVIDE ACCURATE MAILING ADDRESS INFORMATION ON THE APPLICATION FOR THE MAILING OF YOUR CERTIFICATE OF OCCUPANCY.
- 4. WHEN ALL NECESSARY PAPERWORK HAS BEEN COMPLETED, RETURN IT TO THE MVCOG OFFICE OR TO YOUR MUNICIPAL OFFICE. AFTER YOUR APPLICATION HAS BEEN REVIEWED, YOU WILL BE CONTACTED WITH THE AMOUNT OF THE PERMIT FEE. PERMIT MUST BE PAID FOR IN FULL BEFORE ISSUANCE.
- 5. ONCE PERMIT IS ISSUED, IT IS <u>YOUR</u> RESPONSIBILITY TO SCHEDULE ALL NECESSARY INSPECTIONS.

\*FOR RESIDENTIAL PROJECTS, CALL JACK CARNS AT 814-591-0186.

\*FOR COMMERCIAL PROJECTS, CALL BRIAN WRUBLE AT 814-590-2933.

# FAILURE TO CALL FOR A FINAL INSPECTION COULD RESULT IN ADDITIONAL FEES AND/OR PENALTIES.

- 6. IF ANY ASSISTANCE IS NEEDED, CONTACT THE MVCOG OFFICE.
  - A. PHONE (814) 765-3080
  - B. FAX (814) 765-3082
  - C. moshannonvalleycog@gmail.com

(OFFICE HOURS ARE MONDAY AND THURSDAY FROM 9 AM TO 3 PM)

## PENNSAFE BUILDING INSPECTION SERVICES LLC - PERMIT APPLICATION

175 Beaver Drive, P.O. Box 486 – DuBois, PA 15801

Phone: 814-375-1111 Fax: 814-375-1117 Toll Free: 855-PENNSAF

Permit No			
LOCATION OF PROPOSED WORK OR IMPROVEN	IENT		
Municipality:	Ta	x Parcel #	
Site Address:			
Lot#Subdivision/Land Development:		Phase:	Section:
Owner:	Phone#	Fax	<b>κ#</b>
Mailing Address:		Email:	
Principal Contractor:	Phone#	Fax	#
Mailing Address:			_
Architect:	Phone#	Fax	x#
Mailing Address:		Email:	
TYPE OF WORK OR IMPROVEMENT (Circle all the New Building Addition Alteration Repartment of Use Plumbing Electrical Describe the Proposed work:	air Demolition Mechanical Ot	her	_
ESTIMATED COST OF CONSTRUCTION (Reasonable			
<b>DESCRIPTION OF BUILDING USE</b> (Check one then	n complete applicable	<u>e info)</u>	
☐ RESIDENTIAL	☐ <u>NON-RESIDENTIAL</u> (Commercial)		
Single Family Dwelling	Specific Use		
Duplex	Use Group:Construction Type:Change of Use (indicate former and proposed):		
Townhouse	Change of Use (in	aicate formei	r and proposed):
Total Sq. ft. of finished living space	Maximum Occup	ant Load:	
	Maximum Occupant Load: Maximum Live Load:		
	iviaxiiiiuiii Live Lu	au	

Sprinkler system to be installed: (Check	one) YesI	No		
BUILDING DIMENSIONS				
Existing Building Area:	sq. ft.	Number of Stories:		
Proposed Building Area:	sq. ft.	Height Above Grade:ft.		
Total Building Area:	sq. ft.	Area of Largest Floor:sq. ft.		
FLOODPLAIN INFORMATION				
Is the site located within an ident	tified flood plan	area? (Check one) YesNo		
Note: All proposed development Flood Insurance Program and the		rdance with the requirements of the National lood Plain Management Act.		
HISTORIC DISTRICT INFORMATION				
Is the site located within a Histor	ical District? (Ch	eck one) YesNo		
Note: If yes, you must provide pr	oper Historical D	District certification per the UCC Law.		
accordance with the "approved" construand any additional approved building coowner and applicant assumes the responsible of ways, flood areas, etc. Issuance construed as authority to violate, cancel Municipality or any other governing bod applicable codes, ordinances and regular Application for a permit shall be made be authorized agent of either, or by the authorized with the proposed work.	uction document de requirements insibility of location of a permit and or set aside any y. The applicant tions.  by the owner or athorized registers	lessee of the building or structure, or		
•		any reasonable hour to enforce the provisions		
Signature of Owner or Authorized Agent	Prir	nt Name of Owner or Authorized Agent		
Address:		Date:		
Directions to Worksite:				
OFFICE USE ONLY below				
Permit Fee: \$		Submittal Checklist Attached: yesno Review Approval Date:		

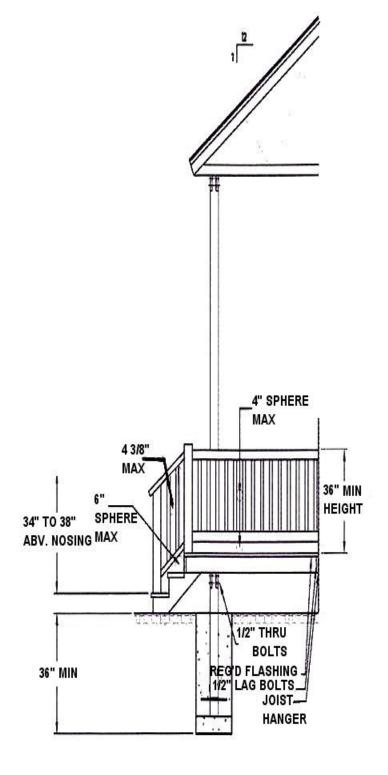
MUNICIPAL PRIOR APPROVA	AL CHECKLIST		
Name of Municipality			
Name of Applicant			
Parcel#	Lot#_		
This Section below to be comple	ted by the Authorized M	/lunicip	al Representative
CHECKLIST ITEMS			
Is the project site located in a Flo	od Area? (Check one)	yes	no
(Circle one)	Residential Project	or	Commercial Project
Description of Work:			
Zoning or Land Use Permit	Approved		Not applicable
Stormwater Management	Approved		Not applicable
Street cut/ Driveway	Approved		Not applicable
Sewage/Onlot Permit	Approved		Not applicable
Water Permit	Approved		Not applicable
PennDot Highway Occupancy	Approved		Not applicable
Floodplain Permit	Approved		Not applicable
Other	Approved		Not applicable
I certify that all required Municip thereby is granted to issue the re		d Regul	ations have been met and approval
Authorized Municipal Representa	ative signature:		
Date:			

\*\*NOTE THAT THIS PERMIT APPLICATION PACKAGE MUST BE COMPLETED AND THEN SUBMITTED WITH THE PROJECT CONSTRUCTION PLANS AND THE CORRESPONDING SUBMITTAL CHECKLIST\*\*

### PENNSAFE BUILDING INSPECTION SERVICES LLC

#### **Deck and Roof Cross Section Submittal**

Roof Size: Width: Length: Roof Type: Gable: \_\_\_\_\_ Hip: \_\_\_\_ Shed: \_\_\_\_ (check one) Trusses: \_\_\_\_\_ Rafters: \_\_\_\_ Spacing of Trusses or Rafters:\_\_\_\_\_ Rafter Size and Span: Ridge Beam: Size: \_\_\_\_\_ Span: \_\_\_\_\_ Roof Sheathing:\_\_\_\_\_ Roof Covering: \_\_\_\_ Roof Header Beam: Size: \_\_\_\_\_ Span: \_\_\_\_\_ Deck Size: Width: \_\_\_\_\_ Length: \_\_\_\_ Footer Size: Width: \_\_\_\_\_ Length: \_\_\_\_ Carrier Beam: Size: \_\_\_\_\_\_ Span: \_\_\_\_\_ Type of Floor Joist: Floor Joist: Size: Span: Decking Material: Number of Steps: Riser Height: \_\_\_\_\_ Tread Depth:



#### PENNSAFE BUILDING INSPECTION SERVICES LLC

#### RESIDENTIAL DECK AND PORCH ROOF PROJECT SUBMITTAL HANDOUT

Every item below should be checked as completed (if applicable), or marked n/a (if not applicable), for your project. This form must be completed in its entirety then returned with attached drawings.

<ul> <li>Application</li> <li>Municipal Prior Approval Form</li> <li>Site Plan showing setbacks</li> <li>Two sets of plans (All dimensions must be indicated, be in ink and drawn to scale)</li> </ul>
**The following items are required to be included on the Building Plan Drawings:**
☐ Floorplan drawing looking down at deck/porch.
<ul> <li>Provide locations of all posts and beam locations and indicate spans.</li> </ul>
☐ Top, front and side views of deck.
☐ Complete cross section (provided)
☐ Size, thickness and depth (below grade) of footings.
☐ Size, type and spacing of support columns.
<ul> <li>Type of wood to be used. (Specify species and grade)</li> </ul>
<ul> <li>Size of floor joist, span and distance between joists.</li> </ul>
☐ Size, type and span of all girder beams.
Height of wood joist, girder and floor above finish grade.
<ul> <li>Type and thickness of floor sheathing. (Decking)</li> </ul>
<ul> <li>Stair riser height and depth/width of tread.</li> </ul>
<ul> <li>Handrail height and ballister spacing.</li> </ul>
<ul> <li>Guardrail height and ballister spacing.</li> </ul>
<ul> <li>Ledger fastening method, i.e bolt spacing.</li> </ul>
☐ Deck flashing method
☐ Roof construction details (see cross section)

\*\*THIS COMPLETED FORM MUST BE SUBMITTED WITH PROJECT PLANS\*\*