

# Application for Building Permit



## Borough of Mechanicsburg

36 West Allen Street  
Mechanicsburg, PA 17055  
Phone: (717)691-3315  
Fax: (717)691-3312

*For Official Use Only*

Date Received: \_\_\_/\_\_\_/\_\_\_ - By \_\_\_\_\_ Received How? \_\_\_\_\_ [ ] Commercial [ ] Residential

Is Application Package Complete:  Yes  No, >>> If not complete, why? : \_\_\_\_\_

If Incomplete, Returned to Applicant? [ ] YES [ ] NO [ ] N/A Current Use Type: \_\_\_\_\_ / New Use Type: \_\_\_\_\_ ZP #: \_\_\_\_\_

3RD PARTY REVIEW NEEDED? [ ] YES [ ] NO IF YES, TO ACSI ON \_\_\_/\_\_\_/\_\_\_

**‘Edmund System’ Information:**

BP App ID #: \_\_\_\_\_ Tax Parcel #: \_\_\_/\_\_\_/\_\_\_/\_\_\_ Contractor ID: \_\_\_\_\_

**BP# Issued:** \_\_\_\_\_ **Date Issued:** \_\_\_/\_\_\_/\_\_\_

Please complete the following, being as detailed as possible.

**ADDRESS OF PROPOSED WORK:** \_\_\_\_\_

Is this structure now, or has it ever been **CONDEMNED** for any reason(s) [ ] NO [ ] YES Reason: \_\_\_\_\_

If **NEW construction**, have all other permits been issued? [ ] YES [ ] NO ... Sewer, # \_\_\_\_\_, Zoning, # \_\_\_\_\_,  
Street Cut, # \_\_\_\_\_, Land Development Plan #'s \_\_\_\_\_

Is this a [ ] Current or [ ] Proposed **RENTAL PROPERTY**? [ ] N/A ..... **ZONING APPROVAL?**: [ ] YES [ ] NO

**HARB District?**: [ ] YES [ ] NO If yes, status and/or copy of **HARB Approval?** [ ] YES [ ] NO - If no, then Incomplete!

**Residential Roof-Covering Replacement** DOES NOT require a Building Permit UNLESS STRUCTURE involved.

**Structural roofing members involved?** (Sheathing, Roof Boards, Rafters, Trusses, Eaves, Overhangs, etc.) [ ] YES [ ] NO

**CONTRACTOR INFORMATION:** PaHIC#: \_\_\_\_\_ **Certificate of Liability Insurance Provided:** [ ] Yes [ ] No

**Workman’s Compensation Coverage:** [ ] Yes [ ] No

**DECLARED PROJECT COST / QUOTE:** \$ \_\_\_\_\_ **SQ. FT. OF NEW CONSTRUCTION:** \_\_\_\_\_ Sq Ft

Name	Mailing Address	Phone Number	Email Address
Owner:			
Design Professional:			
Contractor:			
Job Site Supervisor:			
Authorized Agent:			

**Detailed Description / Scope of Work:** (may be directly from contract or agreement)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Please use additional sheet(s) if more space is needed)

**A detailed Scope of Work MUST be included with this application!**  
(Failure to provide Scope of Work, deems application incomplete)

**Attached?** [ ] YES [ ] NO

**Two copies of Drawings or Plan Sets must be included with this application!** Attached? [ ] YES [ ] NO  
(Hand Drawings are acceptable in Residential projects, if clear and understandable. If not, they will be rejected by the BCO. If scaled drawings submitted, must be at least 1/8" scale.)

**NON-RESIDENTIAL JOBS REQUIRE 1-ADDITIONAL SET OF ELECTRONIC DRAWINGS!**

**Attached?** [ ] YES [ ] NO

False or misleading information will result in Denial or Revocation of Building Permit. Any **changes in Scope or Methods** must be reported to this office for approval of altered work, **Before** said work begins.

**A NOTE ABOUT INSPECTIONS:** Excerpted from PA-Uniform Construction Code, § 403.45.(c) & 403.64.(a) - (c):

The permit holder or an authorized agent shall notify the construction code official when work is ready for inspection and provide access for the inspection. The work shall remain accessible and exposed for inspection. A construction code official may inspect the construction and equipment only during normal hours at the construction site unless the permit holder or agent requests or agrees to another time. Inspections may be conducted under § 403.86 (relating to right of entry to inspect).

**Affidavit:** I hereby certify that I am the owner in fee or authorized agent of the owner in fee of the property upon which the work authorized by the permit sought will be performed. All work will be performed in accordance with all applicable laws of the Commonwealth of Pennsylvania and this jurisdiction. I certify that all information given is accurate and true under penalty of PA18Section 4904.

**This signature verifies that all of the information provided above is true and correct. It indicates having read all statements, typed or hand-written, by this office.** It further acknowledges the understanding that if at any time the Approved Project's Scope of Work or Methods are altered, or, if any information provided is found to be false, the result will be Immediate Revocation of the Building Permit and the possible imposition of fines and/or other applicable penalties.

**Signature of Applicant:** \_\_\_\_\_ **Phone No:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***For Official Use Only***

**BCO Approval:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\*\*See Following Page(s)

For Detailed Fees

**BCO Denied:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

# Permit Fee Schedule Work Sheet

*Informational Only - Mechanicsburg Building Department Staff calculates actual fee total*

Applicant's Information

Name: \_\_\_\_\_

Co. Name: \_\_\_\_\_

St Address: \_\_\_\_\_

City, St, ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_

Date: \_\_\_\_\_

Project Address: \_\_\_\_\_

BP #: \_\_\_\_\_

Project Description: \_\_\_\_\_

Declared Cost of Construction: \$ \_\_\_\_\_

Quantity	Description	Unit Price	Line Total
	Required PA UCC Educational Fee	\$ 5.00	\$
	First \$1,000 of Declared Construction Cost	\$ 46.00	\$
	Any Part of Each Additional \$1,000 of Declared Cost	\$ 10.00	\$
	Non-Residential Plan Review fee per hour	\$ 90.00	\$
	Non-Residential General Inspections, Ea.	\$ 90.00	\$
	Non-Residential Electrical Inspection, Ea.	\$ 100.00	\$
	Non-Residential Cut-It Inspection (PPL or Met-Ed)	\$ 110.00	\$
	Residential General Inspections, Ea.	\$ 70.00	\$
	Residential Electrical Inspection, Ea.	\$ 75.00	\$
	Residential Cut-In Inspection (PPL or MetEd)	\$ 90.00	\$
			\$
Total			\$
<b>Required Inspections and / or Plan Review Fees are an additional cost that must be paid at time of permit issuance</b>			

Payment Method: \_\_\_\_\_, Check #: \_\_\_\_\_, Amount Paid: \$ \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Signature of Staff Receiving Payment: \_\_\_\_\_

<b>**Official Use Only</b>		<b>UCC Plan Review &amp; Required Inspection Fees</b>		<b>**Official Use Only</b>
<b>Quantity</b>	<b>Item</b>	<b>Residential</b>	<b>Commercial</b>	<b>Line Total</b>
	A. UCC Plan Review Fee/hourly	70.00	90.00	\$ . 00
	B. Expedited Plan Reviews available for additional 100%	add 100%	add 100%	\$ . 00
	C. "Walk-Through Inspection" (Pre-work or Pre-application)	70.00	90.00	\$ . 00
	1. Pre-Stone	70.00	90.00	\$ . 00
	2. Footer (inspecting hole/ditch before concrete is poured)	70.00	90.00	\$ . 00
	3. Poured Wall	70.00	90.00	\$ . 00
	4. Foundation (Anchors, Damp-proofing, Drains, etc)	70.00	90.00	\$ . 00
	5. Plumbing (Under-slab Plumbing)	70.00	90.00	\$ . 00
	6. House / Building Wrap	70.00	90.00	\$ . 00
	7. Concrete Slab (Vapor Retarder / Barrier)	70.00	90.00	\$ . 00
	<b>8. Electrical Service – "Service Cut-In" (Svc Entrance Cable from Meter to Panel Box and Ground Rod present with proper sized wire.)</b>	<b>90.00</b>	<b>110.00</b>	<b>\$ . 00</b>
	9. Framing	70.00	90.00	\$ . 00
	9a. <u>M</u> echanical Rough-In	70.00	90.00	\$ . 00
	9b. <u>E</u> lectrical Rough-In	<b>75.00</b>	<b>100.00</b>	<b>\$ . 00</b>
	9c. <u>P</u> lumbing Rough-in	70.00	90.00	\$ . 00
	9d. Above Ceiling	70.00	90.00	\$ . 00
	9e. Fire Stopping / Fire Caulking	70.00	90.00	\$ . 00
	9f. Sprinkler Rough-In	70.00	90.00	\$ . 00
	9g. Chimney / Gas Fireplace Clearances	70.00	90.00	\$ . 00
	10. Energy (Insulation, Sealant, etc)	70.00	90.00	\$ . 00
	11. Wallboard / Drywall	70.00	90.00	\$ . 00
	11a. Fire Wall	70.00	90.00	\$ . 00
	11b. Fire Rated Walls / Ceiling	70.00	90.00	\$ . 00
	12. Accessibility	70.00	90.00	\$ . 00
	13. Final Mechanical	70.00	90.00	\$ . 00
	<b>14. Final Electrical</b>	<b>75.00</b>	<b>100.00</b>	<b>\$ . 00</b>
	15. Final Plumbing	70.00	90.00	\$ . 00
	16. Final Sprinkler / Fire Protection System	70.00	90.00	\$ . 00
	17. Final Building / Final for CO	70.00	90.00	\$ . 00
	18. Blower Door Test / Duct Leak Test (Provide this Report at Final)	70.00	90.00	\$ . 00
	19. Roofing Underlayment / sheathing if approp.			
	20. Roofing Final	70.00	90.00	\$ . 00
	21. Fire Marshal Approval of Knox Box	70.00	90.00	\$ . 00
	Other	70.00	90.00	\$ . 00
	<b>Inspections marked with the same # may be done at the same time, and as a single charge, UNLESS ANY PART NOT READY. Then, Individual Inspection Rates apply.</b>			
	<b>&lt;=Total Inspections</b>	<b>Total Inspection Fees =&gt;</b>		<b>\$ -</b>