# BURRELL TOWNSHIP, INDIANA COUNTY, PA - PERMIT APPLICATION

PO Box 483, Black Lick, PA 15716 Phone: 724-248-3308

Permit No  LOCATION OF PROPOSED WORK OR IMPROV	/FMFNT			
Municipality: Burrell Township				
Tax Parcel #				
Site Address:				
Lot#Subdivision/Land Development:_	Pha	ase:Section:		
Owner:	Phone#	Fax#		
Mailing Address:		_ Email:		
Principal				
Contractor:	Phone#	Fax#		
Mailing Address:				
Architect:	Phone#	Fax#		
Mailing Address:		Email:		
TYPE OF WORK OR IMPROVEMENT (Circle all New Building Addition Alteration		location		
Change of Use Plumbing Electrication				
Describe the Proposed work:				
ESTIMATED COST OF CONSTRUCTION (Reason	nable fair market value)			
DESCRIPTION OF BUILDING USE (Check one	hen complete applicable in	fo)		
<u>RESIDENTIAL</u>	NON-RESIDE	NTIAL (Commercial)		
Single Family Dwelling	Specific Use	Specific Use		
Duplex		Use Group:Construction Type:		
Townhouse	Change of Use (indic	cate former and proposed):		
Total Sq. ft. of finished living space				
		Maximum Occupant Load:		
	Maxim1um Live Loa	Maxim1um Live Load:		

(Page 1)

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		dance 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 regula.  Application for a permit shall be made by authorized agent of either, or by the authorized work.	uction document de requirements nsibility of locati of a permit and or set aside any y. The applicant tions. by the owner or uthorized registe	lessee of the building or structure, or		
•		any reasonable hour to enforce the provisions		
Signature of Owner or Authorized Agent	Prin	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:		

## **Burrell Township, Indiana County, PA Setbacks**

New Home - 25 feet from the the property line and the township road (right of way)

Detached Garage/Sheds - 10 feet from the property line and 25 feet from the township road

Attached Garage to House - 25 feet from the property line and the township road

Decks - 5 feet from the property line and 25 feet from the township road

Fences - 5 feet from the property line and 25 feet from the township road

MUNICIPAL PRIOR APPROVAL CHECKLIST					
Name of Municipality					
Name of Applicant					
Parcel# Lot#					
This Section below to be completed by the Authorized Municipal Representative					
CHECKLIST ITEMS			·		
Is the project site located in a Flood 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 Municipathereby is granted to issue the re-		l Regul	ations have been met and approval		
Authorized Municipal Representative 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

#### 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.

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

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

## 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:

