BOROUGH OF
KENHORST

339 S. Kenhorst Blvd.
Kenhorst, PA 19607
Phone: 610-777-7327
Fax: 610-777-8980
Email: info@kenhorstborough.com
www.kenhorstborough.com

Procedure for Obtaining a Building Permit

1. Fully complete the application for your permit making sure to date and sign it and return it along with the required application fee. The applicant for a permit may be the owner or owner's agent. (Please note that although the application fee is non-refundable, it will be applied toward the total cost of your permit(s), with the balance due at pick-up.)
2. For residential applications, the Building Inspector has a 3-week period to review and approve or deny your permit application. For non-residential (commercial), 6 weeks is allotted. Make sure there are daytime and evening telephone numbers for the Building Inspector to reach you should there be any questions about your application.
3. After the application has been approved, the applicant will be contacted when the permit is ready to be picked up and informed of the balance due. At pick up you will be asked to sign all copies of the permit; pay the balance of the permit fee and you will be given a check list with the inspection requirements for your project.
4. Permits are valid for one (1) year from date of issuance.
5. If you have any questions concerning your application, please contact Kraft Code Services at 610-775-7185. If no one is available when you call, please state the municipality your call pertains to and leave a detailed message.
6. **PLEASE NOTE:** No construction can begin without paying for and receiving your approved permit. Performing work without a permit will result in the doubling of all permit fees.

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Permit Application Checklist

The following information should be included with your permit application:

- ☐ **Application fee:** ***(Applications received without the required application fee will be considered incomplete and will not be processed.)***
- ☐ **Completed Zoning permit application**
- ☐ **Fully completed building permit application**
- ☐ **Two (2) sets of construction drawings including the following:**
  - ☐ Plot plan showing all lot lines and dimensions from new structure to front, side & rear property lines
  - ☐ Floor plans showing dimensions of room(s) and/or structure(s)
  - ☐ Footer specifications
  - ☐ Foundation specifications
  - ☐ Framing plans including the following:
    - ☐ Locations and sizes of bearing walls and/or support posts or columns
    - ☐ Beam and/or headers sizes
    - ☐ Joist and/or rafter sizes
    - ☐ Locations and sizes of egress windows
    - ☐ Elevation views
- ☐ **Driveway permit (if necessary)**
- ☐ **Plumbing/Mechanical permit(s) (if necessary)**
- ☐ **Electrical permit (if necessary)**
- ☐ **Proof of sewage permit (if necessary)**
- ☐ **Proof of legal subdivision**
- ☐ **Proof of contractor workers' compensation insurance or notarized exemption form**
- ☐ **Approved Erosion and Sedimentation Control (E&SC) Plan from the Berks County Soil Conservation District for projects involving earthmoving**

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Zoning Permit Application

Property Information

Owner's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Contractor Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Improvement Information

Cost of improvement: _____ Use of property: ☐ Residential ☐ Commercial ☐ Industrial

Type of use/structure:

☐ Single-family Detached Dwelling ☐ Detached Garage ☐ Addition ☐ Fence ☐ Deck

☐ Single-family Semi-Detached Dwelling ☐ Swimming Pool ☐ Covered Porch ☐ Carport ☐ Shed

☐ Home Occupation/No Impact Home-Based Business (attach letter detailing proposed business)

☐ Other: _____

The proposed building or structure is to be used as a: _____

_____

Size: Length: _____ Width: _____ Height: _____

Will electric service be installed? ☐ Yes ☐ No (If yes, electrical permit required)

Will water supply/drain pipe be installed? ☐ Yes ☐ No (If yes, plumbing permit required)

By applying for this permit, I acknowledge that all information provided in this application is complete and accurate, that the work performed will be in conformance with the Pennsylvania Uniform Construction Code and/or any applicable ordinances of the municipality in which the work is to be performed as well as in accordance with the approved plan after a plan review has been completed. I understand that this is not a permit to begin work, but only an application for a permit and that work is not to start without a permit and that the fees for the permit may be doubled if work starts without a permit. I understand that if I give false information regarding this permit application that any permits issued based on this information will be invalid and the municipality could initiate legal proceedings against me, which could result in my being fined or imprisoned, or in the improvement being removed at my expense or any other legal remedy appropriate under the circumstances.

Applicant Signature: _____ Date: _____

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Building Permit Application

Property Information

Owner's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Contractor Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Architect/Engineer Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Project Information

Cost of Improvement: _____ Lot #: _____

Lot Size: _____ Use Group: _____

Type of Improvement (check all that apply): ☐ New Building ☐ Addition ☐ Alteration ☐ Demolition ☐ Repair/Replacement

☐ Other (describe): _____

Proposed Use (Residential): ☐ One Family ☐ Two Family ☐ Accessory Structure

☐ Other (describe): _____

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Project Information (Continued)

Proposed use (non-residential/commercial): ☐ Amusement ☐ Church ☐ Industrial ☐ Parking ☐ Utility ☐ Hospital ☐ Office ☐ Store

☐ Other (describe): _____

Describe in detail the proposed use of the building (e.g. food processing, machine shop, parking garage, laundry building, etc.) If the use of the building is being changed from the current use, describe the new use:

_____

_____

_____

Principal Type of Construction: ☐ Masonry (Wall Bearing) ☐ Wood Frame ☐ Steel Structure ☐ Reinforced Concrete

Energy/Insulation Compliance Path (only one of the following may be selected):

☐ IRC Chapter 11 ☐ PA Alternative ☐ International Energy Conservation (RESCHECK/COMCHECK software)

Principal Type of Heating: ☐ Gas ☐ Oil ☐ Electric ☐ Other: _____

Type of Sewage: ☐ Public ☐ Private (on-site system)

Type of Water Supply: ☐ Public ☐ Private (well)

Facilities: # of bedrooms _____ # of full bathrooms _____ # of partial bathrooms _____

Dimensions (residential): Basement (sq ft) _____ 1st floor (sq ft) _____ 2nd floor (sq ft) _____

Garage (sq ft) _____ Deck (sq ft) _____ Other _____

Size of Building: # of stories _____ Width _____ Length _____ Height _____

Central Air Conditioning? ☐ Yes ☐ No

Elevator? ☐ Yes ☐ No

Number of Off-Street Parking Spaces: Enclosed _____ Outdoor _____

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Applicant Signature: _____ Date: _____

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Plumbing Permit Application

Property Information

Owner's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Contractor Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Improvement Information

Location where improvements will be made: _____

Type or work: ☐ New Construction ☐ Addition ☐ Alteration/Replacement Cost of Improvement: _____

Brief description of work: _____

Equipment Identification (Type and Number)

☐ Sanitary Sewer Connection _____ ☐ Water Service Connection _____ ☐ Miscellaneous _____

☐ Water Heater _____ ☐ Heating Boiler _____ ☐ Steam Heating Boiler _____

☐ Dom Water Piping Connections _____ ☐ Water Pump _____ ☐ Water Conditioner _____

☐ Dishwasher _____ ☐ Garbage Disposal _____ ☐ Rain Conductor _____

☐ Sanitary Sump Pump _____ ☐ Mechanical Systems _____ ☐ Other _____

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Applicant Signature: _____ Date: _____

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Plumbing Permit Application Sanitary Riser Diagram

First Floor
Basement

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Electrical Permit Application

Property Information

Owner's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Contractor Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Improvement Information

Location where improvements will be made: _____

Type or work: ☐ New Construction ☐ Addition ☐ Alteration/Replacement ☐ Pool Cost of Improvement: _____

Service feeder/distribution panel: ☐ New ☐ Existing Size: _____ Amps

Brief description of work: _____

_____

Equipment Identification (Type and Number)

☐ Ceiling Outlets _____	☐ Ranges _____	☐ Meters _____
☐ Switches _____	☐ Water Heater _____	☐ Subpanels _____
☐ Plug Receptacles _____	☐ Heaters _____	☐ Generators _____
☐ Heat/Smoke Detectors _____	☐ Air Conditioners _____	☐ Motors _____

By applying for this permit, I acknowledge that all information provided in this application is complete and accurate, that the work performed will be in conformance with the Pennsylvania Uniform Construction Code and/or any applicable ordinances of the municipality in which the work is to be performed as well as in accordance with the approved plan after a plan review has been completed. I understand that this is not a permit to begin work, but only an application for a permit and that work is not to start without a permit and that the fees for the permit may be doubled if work starts without a permit. I understand that if I give false information regarding this permit application that any permits issued based on this information will be invalid and the municipality could initiate legal proceedings against me, which could result in my being fined or imprisoned, or in the improvement being removed at my expense or any other legal remedy appropriate under the circumstances.

Applicant Signature: _____ Date: _____

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Mechanical Permit Application

Property Information

Owner's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Contractor Information

Contractor's Name: _____

Street Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____ Mobile Number: _____

Email: _____ Fax: _____

Improvement Information

Location: _____ Cost of Improvement: _____

Type or work: ☐ New Construction ☐ Addition ☐ Alteration/Replacement ☐ Pool

Service feeder/distribution panel: ☐ New ☐ Existing Size: _____ Amps

Brief description of work: _____

_____

Equipment Identification (Type and Number)

☐ Split System Gas/Electric _____ ☐ Split System Electric/Electric _____ ☐ Heat Pump Split System _____

☐ Packaged Terminal A/C _____ ☐ Boiler Hot Water _____ ☐ Steam Boiler (PSI) _____

By applying for this permit, I acknowledge that all information provided in this application is complete and accurate, that the work performed will be in conformance with the Pennsylvania Uniform Construction Code and/or any applicable ordinances of the municipality in which the work is to be performed as well as in accordance with the approved plan after a plan review has been completed. I understand that this is not a permit to begin work, but only an application for a permit and that work is not to start without a permit and that the fees for the permit may be doubled if work starts without a permit. I understand that if I give false information regarding this permit application that any permits issued based on this information will be invalid and the municipality could initiate legal proceedings against me, which could result in my being fined or imprisoned, or in the improvement being removed at my expense or any other legal remedy appropriate under the circumstances.

Applicant Signature: _____ Date: _____

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Driveway Permit Application

Property Information

Owner's Name:

Street Address: City: State: Zip:

Phone Number: Mobile Number:

Email: Fax:

Contractor Information

Contractor's Name:

Street Address: City: State: Zip:

Phone Number: Mobile Number:

Email: Fax:

Improvement Information

Exact location/address of driveway or other improvement (include nearest cross street):

Type of improvement: ☐ Construct new driveway ☐ Pave existing driveway ☐ Driveway modification with State or Township right-of-way

☐ Install ditch, drain or sanitary sewer on State or Township street, road or right-of-way

Cost of driveway improvement: Approximate date work will begin:

Material to be used:

Width of driveway: Distance from centerline of roadway to gutter or ditch:

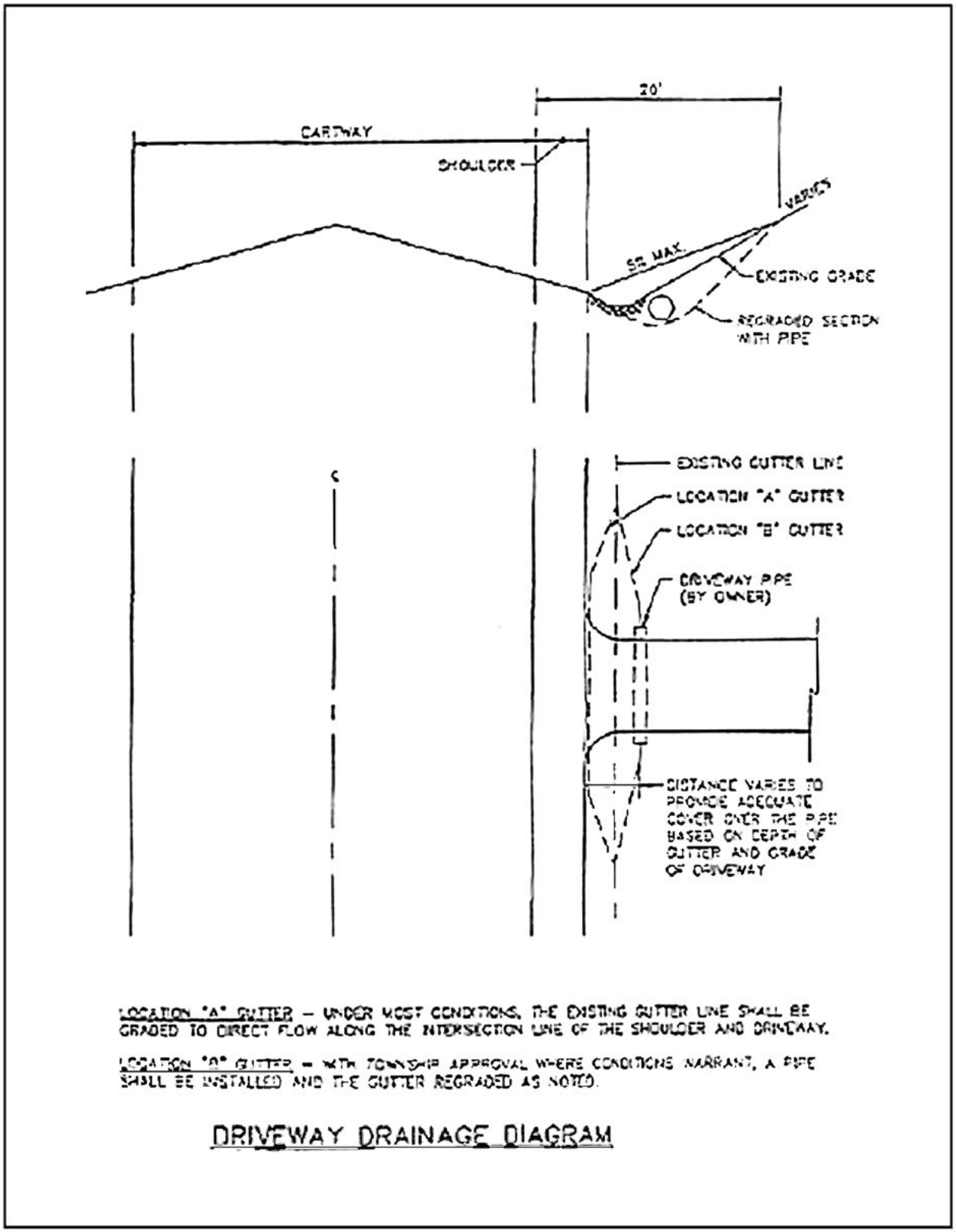
Brief description of work:

Note: All driveways must be inspected prior to paving (to insure proper storm water drainage) and after paving and sealing is complete.

By applying for this permit, I acknowledge that all information provided in this application is complete and accurate, that the work performed will be in conformance with the Pennsylvania Uniform Construction Code and/or any applicable ordinances of the municipality in which the work is to be performed as well as in accordance with the approved plan after a plan review has been completed. I understand that this is not a permit to begin work, but only an application for a permit and that work is not to start without a permit and that the fees for the permit may be doubled if work starts without a permit. I understand that if I give false information regarding this permit application that any permits issued based on this information will be invalid and the municipality could initiate legal proceedings against me, which could result in my being fined or imprisoned, or in the improvement being removed at my expense or any other legal remedy appropriate under the circumstances.

Applicant Signature: Date:

Driveway Permit Application (page 2)



LOCATION "A" GUTTER – UNDER MOST CONDITIONS, THE EXISTING GUTTER LINE SHALL BE GRADED TO DIRECT FLOW ALONG THE INTERSECTION LINE OF THE SHOULDER AND DRIVEWAY.

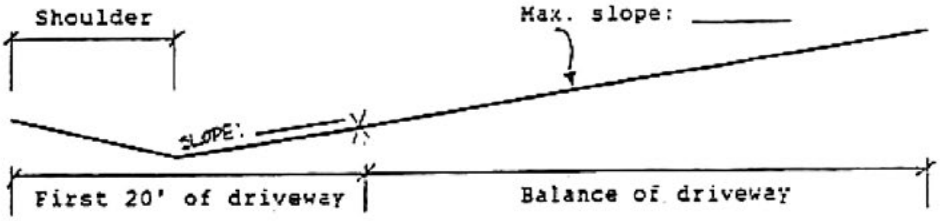
LOCATION "B" GUTTER – WITH TOWNSHIP APPROVAL WHERE CONDITIONS WARRANT, A PIPE SHALL BE INSTALLED AND THE GUTTER REGRADED AS NOTED.

DRIVEWAY DRAINAGE DIAGRAM

Driveway Permit Application (page 3)

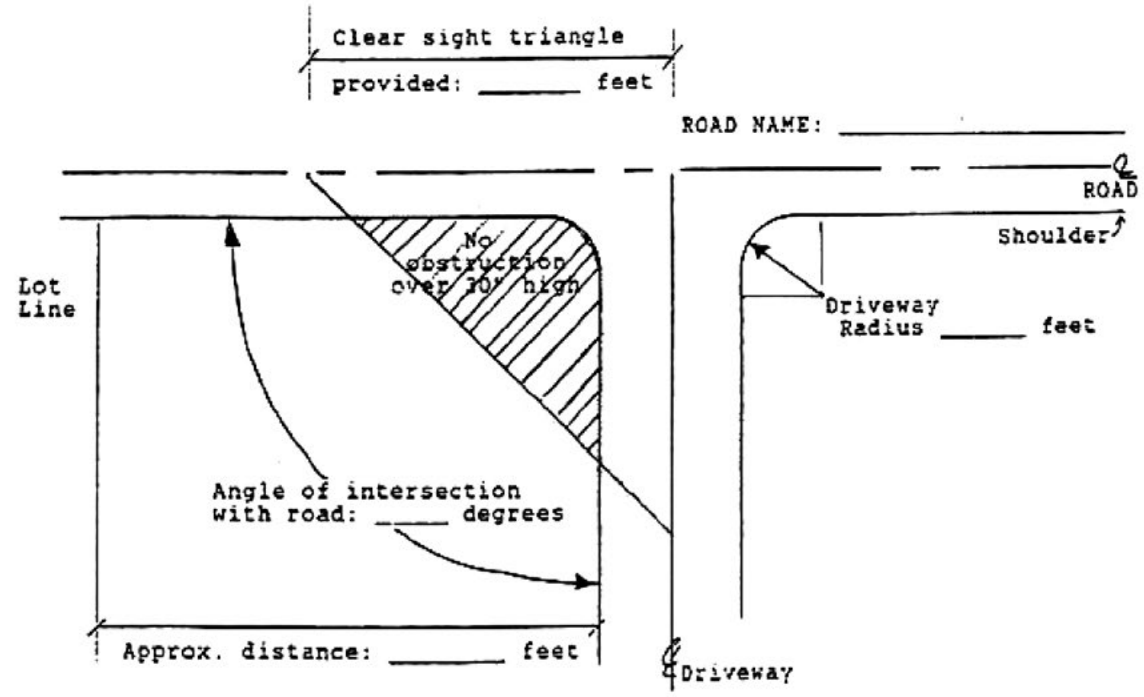
APPLICANT: _____

RIVEWAY PROFILE:



Note downward slopes as negative (-)
Note upward slopes as positive (+)

LAN VIEW OF DRIVEWAY:



FILL IN ALL THE BLANKS

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Certification for Wetlands/Buried Solid Waste

Wetlands

I hereby certify that I am fully aware of, and acknowledge that construction on or use of any property may be significantly restricted or totally prohibited by Federal Law. Lands that are identified as “wetlands” by the United States Army Corps of Engineers cannot be used unless and until a permit is issued by the Corps. Before commencing subdivision, construction or any other improvement of any land, the owner or his/her agent should contact either the Corps of Engineers or a qualified professional to determine whether or not said land could be considered either in whole or in part a “wetland.” The Corps has the authority to require the removal of any improvement placed within a “wetland” by the owner of such land regardless of the cost of the removal or other effect upon the landowner.

No agent or employee of the municipality in which this work will be performed has made any effort to determine whether or not allor a portion of said land constitutes a “wetland.” The granting of a building permit, occupancy permit, onsite sewage disposal permit, or subdivision approval by the municipality **does not** in any way imply that the land does **not** constitute a “wetland,” or that a permit has been issued by the Corps to place an improvement upon the land, or that it is not necessary to determine if any portion of the land constitutes a “wetland.” Any person who proceeds with subdivision, construction, or the placing of any improvement upon land without prior Corps review and/or approval does so **at his own risk without any responsibility on the part of this municipality, its agents or employees.**

Buried Solid Waste

I hereby certify that I have not buried any solid waste on the property of this application. I acknowledge that the Commonwealth of Pennsylvania Solid Waste Management Act specifically prohibits the disposal of solid waste except at legally permitted landfills.

I understand that violation of this act may result in prosecution by appropriate agencies of the Commonwealth.

Name of Applicant (please print): _____

Applicant Signature: _____ Date: _____

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Pennsylvania Workers' Compensation Insurance Coverage Information Form

Please complete all applicable sections of this form paying special attention to the documentation requirements listed in each section. The building and/or zoning permit that you are requesting will not be issued until this form is completed properly.

1. **Are you the homeowner/property owner** performing the work (as requested in this application) yourself?
   - ☐ No. Go to question #2
   - ☐ Yes. Read this exemption statement, sign to indicate your understanding and submit this form with your application
     "Homeowner swears/affirms that he/she will be performing all work on this project and no outside contractors will be employed on this project."
     Signature: _____ Date: _____

2. **Are you the homeowner/property owner** who has hired a contractor to perform the work (as requested in this application)?
   - ☐ No. Go to question #3
   - ☐ Yes. Please have your contractor complete Sections A & B

3. **Are you the contractor** hired by the homeowner/property owner to perform the work as requested in this application)?
   - ☐ Yes. Complete Section A & B
   - ☐ No. Please explain: _____

A. Name of Company: _____
Contact Person: _____ Phone Number: _____
Company Address: _____
Federal or State Employee Identification Number: _____

Please select one of the following options:

- ☐ Applicant is a qualified self-insurer for workers' compensation.
  Please attach a copy of the insurance certificate listing the municipality in which the work will be performed as a certificate holder
- ☐ Applicant carries workers' compensation coverage with an insurance company.
  Please attach a copy of the insurance certificate listing the municipality in which the work will be performed as a certificate holder
- ☐ Applicant is exempt from providing workers' compensation insurance because:
  - ☐ The contractor is a sole proprietorship without employees (The contractor is prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the municipality.)
  - ☐ All of the contractor's employees on the project claim an exemption based on religious grounds as defined in Section 304.2 of the Workers' Compensation Act.

Note: If you are requesting an exemption from the Workers' Compensation Act requirements, you must sign in Section B in front of a notary public.

Will you be using any subcontractor(s) on this project? ☐ No ☐ Yes
(if yes, all subcontractors must present proof of insurance as required under the Pennsylvania Workers' Compensation Act.)

B. My signature as the contractor indicates my understanding of the requirements to provide proof of Workers' Compensation insurance as needed and verifies that all statements made above are true. **I understand that if I am a contractor requesting an exemption under the Workers' Compensation Act that I must sign this form in front of a notary public.**

Signature: _____ Date: _____

Address: _____

NOTARIZATION REQUIRED FOR CONTRACTORS REQUESTING EXEMPTION FROM PROVIDING WORKERS COMPENSATION INSURANCE

County: _____ Municipality: _____

My commission expires: _____ Subscribed and sworn to before me this _____ day of _____ 20 ____ .

SEAL

_____