

Check out: www.cea-code.com for helpful guidelines to most common code and procedure questions.

Contractor or Sub Contractor Information:

General Contractor Name: _____

Address: _____

Phone / Cell () _____ E:mail _____

Contractor's Workman's Compensation Policy: _____ Y / N
Policy # _____ Effective Date: _____ (Provide Sheet)

Waiver of W/C: Pennsylvania requires proof of valid Workman's Compensation or a notarized waiver of Workman's Compensation. (Attached: Notarized Copy)

Owner or Responsible Party must submit to CEA Code Enforcement Agency, a list of all known Contractors and Sub-Contractors who will be associated with the above application.

In addition, CEA Code Enforcement Agency will require a certificate or proof of Workman's Compensation for all workers outside sole proprietors, general liability certificate and certificate or proof of State of Pennsylvania Home Improvement Contractor registration prior to issuing any Building Permit.

Applicant's Certification

As the owner or the authorized agent for the project which this application is filed, I certify that:

1. The description of use, estimated construction coast and all others information provided as part of this application for a building permit is correct.
2. The building or structure described in this application will not be occupied until all known code violations are corrected and a Certificate of Occupancy has been received from the municipality.
3. This project will be constructed in accordance with the approved drawings and specifications (including any required non-design changes) and the Uniform Construction Code standards as specified in 34 PA Code Chapters 401-405.
4. Any changes to the approved documents will be filed with CEA Code Enforcement Agency.
5. If the licensed architect or engineer in responsible charge of this construction should change, written notice of the change will be provided to CEA Code Enforcement Agency.
6. No error or omission in either the drawings and specifications or application, whether approved or not, shall permit or relieve me from constructing the work in any manner other than provided for in 34 PA Code Chapters 401-405.
7. If signed by someone other than the construction owner, this work has been authorized by the owner of record and I have been authorized by the owner to complete this application on his behalf.

Construction Information

Building Type: _____ IBC Code Volume _____ Sprinklered? _____

No of Stories: _____ Construction Type: _____ Occupant Load _____

Other: _____

Existing Structure: _____ Year Built: _____ Last Certificate of Occupancy _____

Accessibility Review (required) _____ 20% _____

IEBC Plan Review Method: Prescriptive / Performance Other: _____

Type of Renovation / Alteration Level: I II III

GFA: Gross Footage Area: _____ Estimated Costs: _____

Permits Required: Building Permit Electrical Permit Mechanical Permit

Demolition Permit Plumbing Permit

Estimated Construction Time: _____

Description of Project: _____

The permit applicant shall submit construction documents in a format approved by the building code official. Construction documents shall be clear, indicate the location, nature and extent of the work proposed, and show in detail that the work will conform to the Uniform Construction Code.

2021 International Building Code (IBC) Commercial Code requires (2 sets) of designed drawings be sealed by a Pennsylvania Architect or Engineer prior to submission of application. A copy of Commercial Plans Examination Guidelines is available at the Building Department.

Large Format File transfers electronically are available by request.

All Applicants must have COMcheck performed and attached for Energy Compliance.

ALL areas must be properly completed for this legal application.

Sanitary / Septic Information

Permit Required: YES NO

SEPTIC OR SANTIARY SYSTEM? _____ SEO required? _____

Project: _____ Tap Permit # _____

Lot/Plan: _____ # of EDU(s) _____

Allocation Year: _____

Approved by: _____ Date Issued: _____

Payment:	TFE	Amount:	CK#	R#
	Check	Amount:	CK#	R#
	Cash	Amount:		R#

Construction documents shall contain a site plan that is drawn to scale. The building code official may waive or modify the following site plan requirements if the permit application is for an alteration or repair or if waiver or modification is warranted. Site plan requirements include all of the following:

- (1) The size and location of new construction and existing structures on the site.
- (2) Accurate boundary lines.
- (3) Distances from lot lines.
- (4) The established street grades and the proposed finished grades.

A permit applicant shall submit an application to the building code official and attach construction documents, including plans and specifications, and information concerning special inspection and structural observation programs, Department of Transportation highway access permits, all other permits or approvals related to the construction required under § 403.102(n) (relating to municipalities electing to enforce the Uniform Construction Code) and other data required by the building code official with the permit application. The applicant shall submit three sets of documents when the Department conducts the review.

The Commonwealth of Pennsylvania established the Uniform Construction Codes (UCC) under Act 45 of 2004, a copy of ALL applicable codes and UCC standards are available online at: **www.pa code.com**. I certify by the signature below, the information presented here is accurate and lawful under 34. PA Code § 403.42 (a) Permit Application.

COMMERCIAL APPLICATIONS require a plan review within (30) thirty business days of the accepted application. (Excluding any local Zoning Approval)

ALL plan review information of this application shall be in writing from CEA Code Enforcement Agency to the responsible party of this application. Failure to provide all information required by the PA UCC shall delay the process in receiving a UCC Permit.

THIS APPLICATION IS A LEGAL DOCUMENT: Any changes or additional information recorded on this application must be made by the applicant, agent or responsible party that signed the application. All requested areas of information within this application shall be completed before acceptance of the application at the Building Department.

**** Failure to properly or legally complete this application shall result in being returned to the applicant for review without legal acceptance. Must be legible for reading.**

Legal Disclaimer: Please Read Before Signing Application

By signing this application, I acknowledge and agree to the following:

1. Compliance with PA UCC

I understand that all construction, design, and related activities must comply with the **Pennsylvania Uniform Construction Code (PA UCC)** and any applicable municipal amendments. It is solely my responsibility, as the applicant, to ensure full compliance with all statutes, local regulations, and code requirements under the PA UCC.

2. Responsibility for Submitted Materials

I am solely responsible for the accuracy, completeness, and compliance of all plans, specifications, and supporting documents submitted with this application. All design documents must be prepared in accordance with the PA UCC and, where required, by a licensed design professional under Pennsylvania law.

3. Plans Examination and Code Enforcement Limitations

I acknowledge that the **Building Code Official, Plans Examiner, or Code Inspector** assigned to this project is prohibited from:

- Designing plans or providing design solutions.
- Assisting in overcoming technical infeasibility.
- Permitting construction or occupancy without full compliance with all applicable code stages, inspections, and permit audits.

Their role is limited to reviewing submitted documents, conducting inspections, and enforcing compliance as required by law.

4. Applicant's Sole Responsibility

Myself, my contractor, agent, or designer bear full responsibility for meeting all code requirements throughout the **plans examination process, construction process, and occupancy process**. Failure to comply may result in enforcement actions, penalties, or denial of permits and certificates of occupancy as provided under **Act 45 of 1999** and **34 Pa. Code Chapter 403**.

I will be acting on behalf of the owner as:

___ Architect ___ Engineer ___ Contractor ___ Agent ___ Owner

___ Other: _____

Signature of Applicant: _____ Date _____
(Must be Legible)

Municipal Information

Jurisdiction Acceptance Date: _____ Time: _____.

By: _____

Application Requirements: Land Survey Site Plan Plot Plan (Attached)

Zoning / Planning / Engineering Approval

Commercial: 2-Sets of Design Drawings by: PA Registered Architect or Engineer.

Workman's Compensation information sheet / Notarized Waiver of W/C .



CODE ENFORCEMENT AGENCY

1633 Route 51, Suite 100, Jefferson Hills, PA 15025

1-866-410-4952

www.cea-code.com

COMMERCIAL ELECTRICAL APPLICATION

Date: _____ Jurisdiction of Work: _____

Applicant Name on Permit: _____

Permit Address: _____

Electrical Contractor: _____

Contractor Address: _____

Email: _____

Primary Contact: _____ Contact Phone: _____

License #: _____ Workers Compensation Carrier: _____
(If applicable)

Policy Number: _____ Policy Period: _____

Architect or Engineers' Name: _____

Description of Work to be Performed:

New Service / Existing Service Name of Power Company: _____

Start Date: _____ Expected Completion Date: _____

INVOICE for Electrical Permit & Inspections – Payable to CEA Code Enforcement

Bill to: _____ Bill to Address: _____

Or Email Address: _____

ELECTRICAL PERMIT WILL BE ISSUED UPON RECEIPT OF PAYMENT



This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Date _____

Return Application to: electrical@cea-code.com



CODE ENFORCEMENT AGENCY

1633 Route 51, Suite 100, Jefferson Hills, PA 15025

1-866-410-4952

www.cea-code.com

PA L&I A191

Permit# _____

APPLICATION & PERMIT FOR ELECTRICAL INSPECTION

Applicant must complete required sections for issuance of certificate of compliance; no certificate will be issued on an incomplete application.

Municipality _____

County, State _____

Address _____

Lot # _____ Development _____

Owner _____

Occupant _____

Owner Telephone _____

Use of Structure _____

Utility Company _____

Pole/Trans# _____ Meter# _____

Directions _____

Type of Inspection: Service Entrance Rough Final Temp. Service Survey Other _____

Qty.			Qty.			Qty.		
Service Equip.	Amp		Receptacles			Oven	KW/Amp	
Service Equip.	Amp		Switches			Range	KW/Amp	
Service Equip.	Amp		Fixtures			Cooktop	KW/Amp	
No. of Meters			Ceiling Fans			Dryer	KW/Amp	
Sub Panels	Amp		Air Cond.	Hp/Amp		Pump	Hp/Amp	
Sub Panels	Amp		Dishwasher	Hp/Amp		Whirlpool/Spa		
Sub Panels	Amp		Disposal	Hp/Amp		Hot Tub		
Sub Panels	Amp		Hood/Vent Fans			240 Volt Receptacle		

Type of Work: New Rewire Emergency

Qty.				Qty.														
Heat Pump				Disconnects		Amp												
Water Heater		KW/Amp		Disconnects		Amp												
Feeders				Disconnects		Amp												
Feeders				Emer./Exit Units														
Transformers		KVA		Other Equip.														
Transformers		KVA																
Transformers		KVA																
Smoke Alarms																		
Motors: Qty	1/20	1/12	1/10	1/8	1/6	1/4	1/3	1/2	3/4	1	1 1/2	2						
Motors: Qty	3	5	7 1/2	10	15	10	15	20	25	30	40	50	75	100				
Electric Heat: Qty	500	750	1000	1250	1500	1750	2000	2250	2500	2750	3000							

INVOICE for ELECTRICAL SERVICES – PAYABLE to CEA.

Applicant _____ Address _____

Business Name _____ City, State, Zip _____

Applicants Signature _____ Telephone _____ Fax _____

Email _____

Fee Due at time of Application\$ _____

No Inspection will be Finalized until payment is made.

Inspector Signature: _____ Date: _____



CODE ENFORCEMENT AGENCY

1633 Route 51, Suite 100, Jefferson Hills, PA 15025

1-866-410-4952

www.cea-code.com

COMMERCIAL ELECTRICAL APPLICATION

Date: _____

Jurisdiction of Work: _____

Applicant Name on Permit: _____

Permit Address: _____

Electrical Contractor: _____

Contractor Address: _____

Email: _____

Primary Contact: _____ Contact Phone: _____

License #: _____ Workers Compensation Carrier: _____
(If applicable)

Policy Number: _____ Policy Period: _____

Architect or Engineers' Name: _____

Description of Work to be Performed:

New Service / Existing Service Name of Power Company: _____

Start Date: _____ Expected Completion Date: _____

INVOICE for Electrical Permit & Inspections – Payable to CEA Code Enforcement

Bill to: _____ Bill to Address: _____

Or Email Address: _____

ELECTRICAL PERMIT WILL BE ISSUED UPON RECEIPT OF PAYMENT



This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Date _____

Return Application to: electrical@cea-code.com



CODE ENFORCEMENT AGENCY

1633 Route 51, Suite 100, Jefferson Hills, PA 15025

1-866-410-4952

www.cea-code.com

PA L&I A191

Permit#

APPLICATION & PERMIT FOR ELECTRICAL INSPECTION

Applicant must complete required sections for issuance of certificate of compliance; no certificate will be issued on an incomplete application.

Municipality

County, State

Address

Lot # Development

Owner

Occupant

Owner Telephone

Use of Structure

Utility Company

Pole/Trans# Meter#

Directions

Type of Inspection: Service Entrance Rough Final Temp. Service Survey Other

		Qty.			Qty.			Qty.
Service Equip.	Amp		Receptacles			Oven	KW/Amp	
Service Equip.	Amp		Switches			Range	KW/Amp	
Service Equip.	Amp		Fixtures			Cooktop	KW/Amp	
No. of Meters			Ceiling Fans			Dryer	KW/Amp	
Sub Panels	Amp		Air Cond.	Hp/Amp		Pump	Hp/Amp	
Sub Panels	Amp		Dishwasher	Hp/Amp		Whirlpool/Spa		
Sub Panels	Amp		Disposal	Hp/Amp		Hot Tub		
Sub Panels	Amp		Hood/Vent Fans			240 Volt Receptacle		

Type of Work: New Rewire Emergency

Qty.										Qty.									
Heat Pump					Disconnects					Amp									
Water Heater		KW/Amp			Disconnects					Amp									
Feeders					Disconnects					Amp									
Feeders					Emer./Exit Units														
Transformers		KVA			Other Equip.														
Transformers		KVA																	
Transformers		KVA																	
Smoke Alarms																			
Motors: Qty		1/20	1/12	1/10	1/8	1/6	1/4	1/3	1/2	3/4	1	1 1/2	2						
Motors: Qty		3	5	7 1/2	10	15	10	15	20	25	30	40	50	75	100				
Electric Heat: Qty		500	750	1000	1250	1500	1750	2000	2250	2500	2750	3000							

INVOICE for ELECTRICAL SERVICES – PAYABLE to CEA.

Applicant Address

Business Name City, State, Zip

Applicants Signature Telephone Fax

Email

Fee Due at time of Application\$

No Inspection will be Finalized until payment is made.

Inspector Signature: Date:



CODE ENFORCEMENT AGENCY
1633 Route 51, Suite 100, Jefferson Hills, PA 15025
1-866-410-4952 www.cea-code.com

Pennsylvania Workman's Compensation EXEMPTION Waiver

Name of Applicant: _____

Business Name or DBA: _____

Street Address: _____

City _____ State: _____ Zip Code: _____

Telephone #. () _____ Email: _____

NOTE: A legal PA Workman's Compensation notarized waiver is specifically for single owner proprietors without any employees (including helpers) and religious exemptions. If you have ANY employees a waiver is not acceptable.

Waiver as a General Contractor or Applicant:

In addition, CEA Code Enforcement Agency will require a certificate or proof of Workman's Compensation for all SUB-workers outside sole proprietors, general liability certificate.

() Contractor with no employees Contractor is prohibited by law from employing any individual to perform work pursuant to any building permit unless contractor provides proof of Workers' Compensation Insurance to the jurisdiction.

() Religious Exemption : _____

() Property Owner acting as Self - Contractor (No Employees) _____

NOTARIZATION – ALL APPLICANTS MUST COMPLETE THIS SECTION

I, _____, the above-named applicant, do swear that the foregoing information is true and correct, and affix my signature hereto in the presence of a Notary Public.

Subscribed and sworn before me this _____ day of _____, 202__.

Signature of Applicant: _____

Signature of Notary Public : _____

My Commission expires: _____

(Notary Stamp)