# INSTRUCTIONS TO APPLICANTS FOR A PERMIT FOR WORK REGULATED UNDER THE MEDIA BOROUGH CODES

NOTICE TO CONTRACTORS AND OTHER BUILDING PERMIT APPLICANTS:

- **NO WORK (INCLUDING DEMOLITION) MAY BEGIN UNTIL YOU HAVE THE ACTUAL PERMIT IN YOUR POSSESSION!**
- Media Borough does not issue verbal authorization for work to commence.
- Processing time for a permit varies with the complexity of the job.
- Three to fourteen days are the average turn-a-round times.

  - To expedite the processing of your permit, please be certain that it is complete and you have turned in all of the following required documents:
    - ✓ Fully completed Media Borough application for a building permit.
    - ✓ Certificate of Insurance which covers you for general liability and workers compensation.
    - ✓ Proof of registration for the Borough's earned income tax.
    - ✓ Signature of the property owner authorizing you to work.

Incomplete applications will be returned to you and the start of your work thereby delayed.

*Jim Jeffery*
Code Enforcement Officer

Permit Fee:
o Building _____
o Electrical _____
o Plumbing _____
Plumbing Registration: _____
Business Privilege: _____
Other: _____

# APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

APPLICANT INSTRUCTIONS: For all applications, complete Parts 1, 2, 3, 4 and 5 of this form. If electrical work, complete also Part 6. If plumbing work, complete also Part 7. If mechanical work, complete also Part 8. For other permits, complete also Part 9. Site Plan (Part 10) is to be shown on Page 4 or attached hereto. Parts 11-18 (Pages 5 and 6) are for department use only.

| App. Date | Type Permit | | | | Is Owner Applicant (Y/N) |
|---|---|---|---|---|---|
| ____/____/____ | ☐ Building (B) | ☐ Electrical (E) | ☐ Mechanical (M) | ☐ Plumbing (P) ☐ Other (O) (See item 9) | |

## 1. PROPERTY INFORMATION

| Street Address | Apt. | Zip | Parcel Number | Zoning |
|---|---|---|---|---|
| | | | | |

| Subdivision | Lot Number | Parcel Type | | | |
|---|---|---|---|---|---|
| | | ☐ Residential (R) | ☐ Industrial (I) | ☐ Commercial (C) | ☐ Other (O) |

## 2. OWNER INFORMATION

| First Name | Last name or Business Name | Phone | |
|---|---|---|---|
| | | | |

| Street Address | City | State | Zip |
|---|---|---|---|
| | | | |

## 3. CONTRACTORS INFORMATION

| | NAME OF CONTRACTOR (LAST NAME, FIRST NAME) | ST. ADDRESS | CITY, ST. | LICENSE NO. |
|---|---|---|---|---|
| Applicant (not owner) | | | | |
| Architect / Engineer | | | | |
| General Contractor | | | | |
| Excavation | | | | |
| Concrete | | | | |
| Carpentry | | | | |
| Electrical | | | | |
| Plumbing | | | | |
| Sewer | | | | |
| Mechanical | | | | |
| Roofing | | | | |
| Masonry | | | | |
| Drywall or Lathing | | | | |
| Sprinkler | | | | |
| Paving | | | | |
| Fire Alarm | | | | |
| | | | | |

No. _____ Street

## 4. CERTIFICATION

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the code official or the code official's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

SIGNATURE OF APPLICANT ADDRESS PHONE NO.

RESPONSIBLE PERSON IN CHARGE OF WORK, TITLE PHONE NO.

## 5. BUILDING PERMIT APPLICATION

| For Dept. Use Only | Request Plan No. Assignment (Y/N) |
|---|---|
| Plan Number | |

**IMPROVEMENT TYPE:**

- ☐ NEW CONSTRUCTION (1)
- ☐ ADDITION (2)
- ☐ ALTERATION (3)
- ☐ REPAIR / REPLACEMENT (4)
- ☐ DEMOLITION (5)
- ☐ RELOCATION (6)
- ☐ FOUNDATION ONLY (7)
- ☐ CHANGE OF USE ONLY (8)

**PROPOSED USE:**

**ASSEMBLY**
- ☐ THEATRE (1)
- ☐ NIGHT CLUB (2)
- ☐ RESTAURANT (3)
- ☐ CHURCH (4)
- ☐ OTHER ASSEMBLY (5)

☐ **BUSINESS (6)**

**EDUCATIONAL**
- ☐ (GRADES 1-12) (7)
- ☐ DAY CARE FACILITY (8)

**FACTORY**
- ☐ MODERATE HAZARD (9)
- ☐ LOW HAZARD (10)

☐ **HIGH HAZARD (11)**

**INSTITUTIONAL**
- ☐ GROUP HOME (12)
- ☐ HOSPITAL (13)
- ☐ JAIL (14)

☐ **MERCANTILE (15)**

**RESIDENTIAL**
- ☐ HOTEL, MOTEL (16)
- ☐ MULTI-FAMILY (17)
- ☐ BOCA TWO FAMILY (18)
- ☐ CABO TWO FAMILY (19)
- ☐ BOCA SINGLE FAMILY (20)
- ☐ CABO SINGLE FAMILY (21)

**STORAGE**
- ☐ MODERATE HAZARD (22)
- ☐ LOW HAZARD (23)

☐ **OTHER (24)**
PARKING GARAGE
CARPORT
MOTOR FUEL SERV.
REPAIR GARAGE
PUBLIC UTILITY
HPM _____

**Structural** (check that applicable)
**Frame**

☐ Steel (1) ☐ Concrete (3) ☐ Other (5), Identify: _____
☐ Masonry (2) ☐ Wood (4)

**Exterior** (Check those applicable)
**Walls**

☐ Steel (1) ☐ Concrete (3) ☐ Other (5), Identify: _____
☐ Masonry (2) ☐ Wood (4)

Are any **structural assemblies** fabricated off-site? ☐ Yes ☐ No

| | | |
|---|---|---|
| Street Frontage (Feet) | Stories (Number) | Lot Area (Sq. feet) |
| Front Setback (Feet) | Bed Rooms (Number) | Building Area (Sq. feet) |
| Rear Setback (Feet) | Full Baths (Number) | Parking Area (Sq. feet) |
| Left Setback (Feet) | Partial Baths (Number) | Living Area (Sq. feet) |
| Right Setback (Feet) | Garages (Number) | Basement Area (Sq. feet) |
| Height Above Grade (Feet) | Windows (Number) | Garage Area (Sq. feet) |
| New Residential Units (Number) | Fireplaces (Number) | Office/Sales (Sq. feet) |
| Existing Residential Units (Number) | Enclosed Parking (Number) | Service (Sq. feet) |
| Elevators / Escalator (Number) | Outside Parking (Number) | Manufacturing (Sq. feet) |
| Est. Start ____/____/____ | Est. Finish ____/____/____ | Building Est. Value $ |

## 6. ELECTRICAL PERMIT APPLICATION

**Electrical Work** ☐ **Yes** ☐ **No**

Total Service_____AMPS | Number of Circuits:_____2 WIRE _____3 WIRE _____4 WIRE | Number of Service Outlets:_____110V _____220V

| | POWER DEVICES | No. | OUTPUT/LOAD | | POWER DEVICES | No. | OUTPUT/LOAD |
|---|---|---|---|---|---|---|---|
| 1 | | | | 7 | | | |
| 2 | | | | 8 | | | |
| 3 | | | | 9 | | | |
| 4 | | | | 10 | | | |
| 5 | | | | | | | |
| 6 | | | | | Total Number of Motors | | |

Utility Service Revisions:

| | | |
|---|---|---|
| Est. Start ____/____/____ | Est. Finish ____/____/____ | Electrical Work Est. Value $ |

## 7. PLUMBING PERMIT APPLICATION

**Plumbing Work ☐ Yes ☐ No**

| Enter the Number of Fixtures Being Installed, Replaced or Repaired | | | | | |
|---|---|---|---|---|---|
| Tubs/Showers | | Drinking Fountains | | Back Flow Preventers | |
| Shower Stalls | | Floor Drains | | Water Pumps | |
| Lavatories | | Water Heaters | | Roof Openings | |
| Toilets | | Water Softeners | | Parking Lot Drains | |
| Urinals | | Sewage Ejectors | | Inside Downspouts | |
| Sinks | | Sump Pumps | | Swimming Pools | |
| Laundry Tubs | | Grease Traps | | Standpipes (Y/N) (Number Hose Outlets) | |
| Dishwashers | | Bidets | | Fire Sprinklers (Y/N) (Number of Heads) | |
| Garbage Disposals | | | | Lawn Sprinklers (Y/N) (Number of Heads) | |
| | | | | Total Fixtures | |
| Public Water (Y/N) | | Public Sewer (Y/N) | | | |
| Water Service Size _____IN. | | Water Meter Size _____IN. | | Avg. Daily Water Use _____GPD | |
| Utility Service Revisions: | | | | | |
| Est. Start ____/____/____ | | Est. Finish ____/____/____ | | Plumbing Work Est. Value $ | |

## 8. MECHANICAL PERMIT APPLICATION

**Mechanical Work ☐ Yes ☐ No**

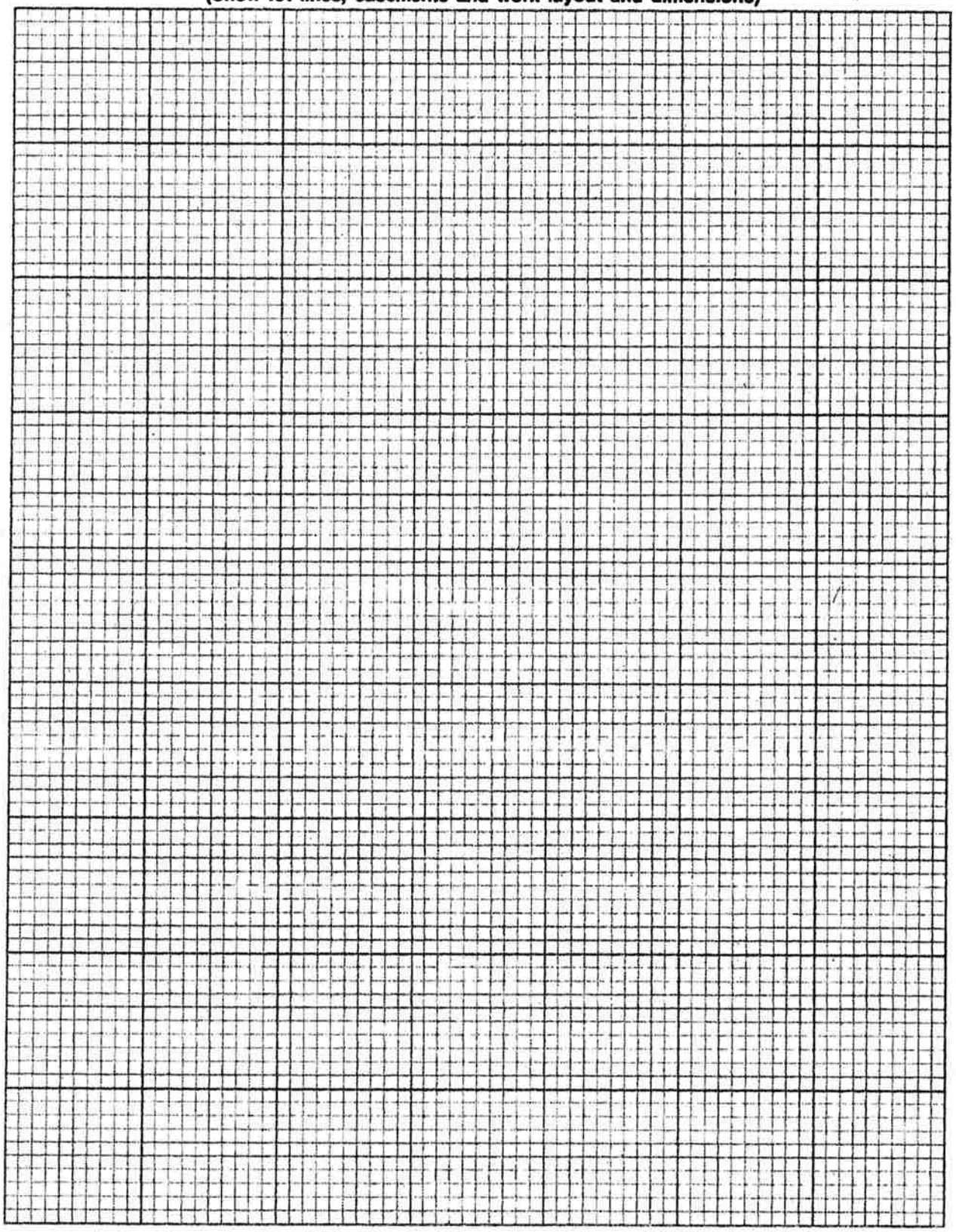
| Enter Number of New or Replacement Units | | | | | |
|---|---|---|---|---|---|
| Forced Air Furnace | | Incinerator | | Air Handling Unit | |
| Unit Heater | | Boiler | | Heat Pump | |
| Gas/Oil Conversion | | Coil Unit | | Air Cleaner | |
| Space Heater | | Window A/C Unit | | Kitchen Exhaust Hood | |
| Gravity Furnace | | Split System A/C | | Hazardous Exhaust System | |
| Solid Fuel Appliance | | A/C Compressor | | Electric Furnace | |
| Utility Service Revisions: | | | | | |
| | | | | | |
| Type of Heating Fuel: (Check One) ☐ Gas (1) ☐ Oil (2) ☐ Electric (3) ☐ Coal (4) ☐ Wood (5) ☐ Other (6) | | | | | |
| Est. Start ____/____/____ | | Est. Finish ____/____/____ | | Mechanical Work Est. Value $ | |

## 9. OTHER REQUIRED PERMIT APPLICATION(S)

| Permit Type: | | |
|---|---|---|
| Description of Work: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Est. Start ____/____/____ | Est. Finish ____/____/____ | Est. Value $ |

## 10. SITE PLAN

**(Show lot lines, easements and work layout and dimensions)**



**SCALE = 1 inch = _____ FEET**

PAGES 5 AND 6 ARE FOR DEPARTMENT USE ONLY

## 11. DATA ENTRY

Application Received: / /

By:

Application Reviewed: / /

By:

Data Entry: / /

By:

## 12. FLOODPLAIN EVALUATION

FLOOD MAP NUMBER & DATE_____ LOWEST FLOOR ELEVATION_____

FLOOD ZONE_____ BASE FLOOD ELEVATION_____

## 13. ZONING PLAN EVALUATION

ZONING DISTRICT_____ MAP NUMBER_____

LOT AREA (From Page 2)_____ LOT COVERAGE (%)_____

LOT AREA PER ROOM_____ ENCROACHMENTS_____

OFF STREET PARKING SPACES, REQUIRED_____ PROVIDED_____

LOADING SPACE_____

SIGNS; NUMBER_____ SIZE OF EACH SIGN_____

PLANNING COMMISSION APPROVAL REQUIRED_____

BOARD OF ZONING APPEALS APPROVAL REQUIRED_____

## 14. PLAN REVIEW RECORD

| Plans Review Required | Check | Plan Review Fee | Date Plans Started | By | Date Plans Approved | By | Notes |
|---|---|---|---|---|---|---|---|
| BUILDING | | $ | | | | | |
| PLUMBING | | $ | | | | | |
| MECHANICAL | | $ | | | | | |
| ELECTRICAL | | $ | | | | | |
| | | $ | | | | | |
| TOTAL | | $ | TO BE ENTERED ON PART 18 | | | | |

## 15. ADDITIONAL PERMITS REQUIRED

| Permit or Approval | Check | Date Obtained | Number | By | Permit or Approval | Check | Date Obtained | Number | By |
|---|---|---|---|---|---|---|---|---|---|
| BOILER | | | | | PLUMBING | | | | |
| CURB OR SIDEWALK CUT | | | | | ROOFING | | | | |
| ELEVATOR | | | | | SEWER | | | | |
| ELECTRICAL | | | | | SIGN OR BILLBOARD | | | | |
| FURNACE | | | | | STREET GRADES | | | | |
| GRADING | | | | | USE OF PUBLIC AREAS | | | | |
| OIL BURNER | | | | | DEMOLITION | | | | |
| | | | | | | | | | |

## 16. PROJECT DOCUMENTS (DRAWINGS & CALCULATIONS)

| TYPE DRAWINGS/REPORT | SUBMITTED | SIGNED AND SEALED | DATE | REVISION DATE |
|---|---|---|---|---|
| Site Plan | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Soil Report | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Architectural Drawings | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Structural Drawings | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Mechanical Drawings | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Electrical Drawings | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Job Specifications | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Structural Connect. Drwngs. | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Structural Calculations | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Special Inspection Data | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Sprinkler Drawings | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| Sprinkler Calculations | ☐ Yes ☐ No | ☐ Yes ☐ No | | |
| | | | | |

## 17. OTHER DEPARTMENT APPROVALS

| Signature | Date | Signature | Date |
|---|---|---|---|
| Fire | | Health and Sanitation | |
| Public Works | | Water | |
| Zoning Planning | | Architectural Review | |
| Environmental Management | | | |

## 18. VALIDATION

| | | | |
|---|---|---|---|
| Building Permit | Date | Number | Permit/Insp. Fee |
| Electrical Permit | Date | Number | Permit/Insp. Fee |
| Plumbing Permit | Date | Number | Permit/Insp. Fee |
| Mechanical Permit | Date | Number | Permit/Insp. Fee |
| | Date | Number | Permit/Insp. Fee |
| | Date | Number | Permit/Insp. Fee |

| | |
|---|---|
| Plan Review Fee (From Part 14) | |
| Certificate of Occupancy Fee | |
| Other Fee | |
| **TOTAL FEES** | |

Prepared By:_____ Date_____

Approved By:_____ Title_____