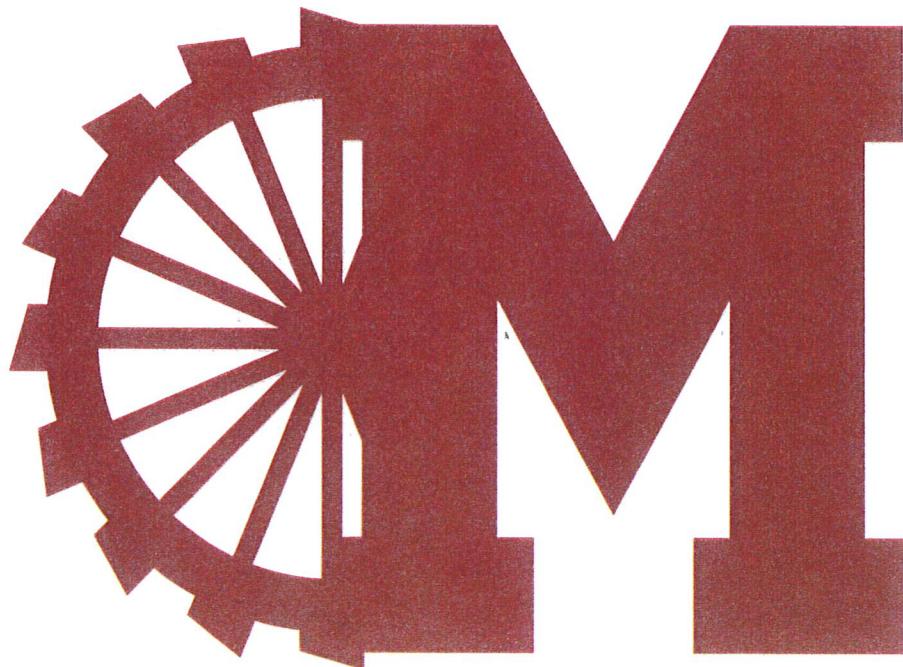


COMMERCIAL



Customer Assistance Guide



133 Browns Hill Road | Valencia, PA | 16059
info@middlesextownship.org
724-898-3571



Middlesex Township | 133 Browns Hill Road | Valencia, PA 16059
Office 724.898.3571 | Fax 724.898.4607
Info@MiddlesexTownship.org

When applying for a Building and/or Zoning Permit you need the following:

- Fill out the appropriate application answering all questions applicable to your job. Application must be legible and signed.
 - If a portion of the application is not applicable to your project put a N/A on the line.
- A Site Plan showing the location of the existing improvements/structures on your property and approx. distances to all property lines, well, septic system, driveway, etc. Also show the location of the proposed construction. (2 copies)
- Drawings showing details of the construction you want to do. (2 copies)
- Copy of Contractors Certificate of Insurance for Workers Compensation **OR** if doing the work yourself submit Workers Compensation Insurance Coverage Waiver *[refer to the attached document]*.

After Permit Application is submitted:

- After submitting all required documents your building permit application and drawings will be reviewed. Once the building permit application is approved by Zoning Officer plans are submitted to MDIA. MDIA has 15 business days to review submitted application. Zoning permit applications are reviewed within 10 business days by Zoning Officer.
- Middlesex Township will contact you with an approval or denial.
- If approved, your permit will be issued. The inspection & administrative fees are due when you pick up the permit. You will also obtain a copy of your original application and stamped set of plans.

After Permit is issued:

- The Building or Zoning Permit placard is to be visible on site at all times during the construction process.
- To schedule an inspection call the number provided with your permit documents. (Building ONLY)
 - If you request an inspection BEFORE 3 pm, every effort is made to schedule the inspection for the next business day.
 - Be advised additional fees may be applied, throughout the project, for failed or missed inspections.
- The copy of your application and approved plans are to remain on site when the building inspectors come for inspections. Be advised: we cannot inspect if these are not on site and you may incur additional costs due to extra trip(s) by the inspector. (Building ONLY)



APPLICATION FOR BUILDING AND/OR ZONING PERMIT

Please print legibly – failure to do so may result in a denial, delay, or rejection of this application.

Permit Application No. _____

1. PROPERTY / SITE INFORMATION

Site Address: _____ Tax Map / Parcel No.: _____
Complete Address / Street / Lot #

City _____ State _____ Zip _____

State

Zip

Municipality: _____ Zoning: _____

Use: Residential Single-Family Dwelling Multi Family New Relocated Manufactured Home Modular

Commercial Other _____ Floodplain present: Yes No

Improvement Type: New Addition Alteration Repair/Replacement Relocation Accessory _____

2. LAND / PROPERTY OWNER'S INFORMATION (Complete Section 5 for Contractor's Info)

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

3. BUILDING / STRUCTURE OWNER'S INFORMATION [If Different From Above]

First Name _____ Mi. _____ Last Name _____ Phone No: _____ Cell No.: _____

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

4. BUILDING PERMIT APPLICATION

Provide below description of Work: (Also provide details on plot plan: Show all improvements on lot & approx. distances to lot lines)

Total Lot Area: _____ Acres/Sq. Ft. _____ ESTIMATED COST OF CONSTRUCTION: \$_____

5. CONTRACTOR INFORMATION

Business Name: _____ Phone No: _____

Contractor Street Address _____ City _____ State _____ Zip _____

Person in Charge of Work: _____ Phone No.: _____

Email: _____ Cell No.: _____

Workman's Compensation Insurance: Provided On Record Exempt PA Home Improvement Contr. Reg. # _____

►► THIS SECTION MUST BE FULLY COMPLETED OR THE APPLICATION MAY BE REJECTED AS INCOMPLETE ◄◄

6. CERTIFICATION

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code official or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project. I further certify that this information is true & correct to the best of my knowledge and belief. Ref. 18 Pa. Cons. Stat. §4903.

Applicant Signature _____ Print Name (*legibly*): _____ Date _____

Applicant Phone (Land Line and Cell) _____ Applicant Email _____

Business Name (if applicable) _____ Email _____

Business OR Applicant Complete Mailing Address

Business Phone Number (Land Line and Cell) _____

7. PROJECT DETAILS

Trades: Building Electrical Work Plumbing Work Mechanical Work (HVAC) Fire Suppression/Fire Alarm System

Heat Source (if applicable): _____ Fuel Type: _____

Foundation Type: Crawlspace Foundation Slab at Grade Piers Other: _____

Details: _____

SUBCONTRACTOR INFORMATION

Please list subcontractors for major trades. Use additional sheet(s) if needed.

Additional sheet(s) attached

Contractor _____ Address _____ Phone No _____ Pa HIC # _____

Contractor _____ Address _____ Phone No _____ Pa HIC # _____

Contractor _____ Address _____ Phone No _____ Pa HIC # _____

Contractor _____ Address _____ Phone No _____ Pa HIC # _____

APPLICANT OR AUTHORIZED AGENT IS RESPONSIBLE FOR CONTACTING MDIA OFFICE FOR ALL REQUIRED INSPECTIONS.

►► IF NOT APPLICABLE TO YOUR PROJECT PLEASE PUT N/A ON THE LINE/ SPACE ◄◄

DIRECTIONS TO THE SITE LOCATION

Please give directions to the work site from a known landmark and/or intersection. Use a directional drawing also in the space provided below if that would assist.

Applicant: _____ Phone: _____

Site Street Address: _____

Directions: _____

Use this space if needed to further clarify the site location:

Please Note: Inspectors cannot inspect what they cannot find. Be certain the directions are clear. Use Road or Street names, distances between turn offs, and the direction of that travel (North South East or West). Landmarks are very helpful.

BUTLER COUNTY BUILDING PERMIT APPLICATION

I.D. NO. _____ DISTRICT _____ MAP AND PARCEL NO. _____

IMPORTANT: COMPLETE ALL ITEMS. MARK BOXES WHERE APPLICABLE

IDENTIFICATION

OWNER'S NAME PER DEED OR TITLE	NAME	MAILING ADDRESS	PROPERTY ADDRESS	PHONE NO.
PREVIOUS OWNERS				
CONTRACTOR				

II. TYPE AND COSTS OF IMPROVEMENTS

A. TYPE OF IMPROVEMENT

- 1. NEW BUILDING
- 2. ADDITION
- 3. ALTERATIONS
- 4. REPAIR - REPLACEMENT
- 5. WRECKING
- 6. RELOCATION
- 7. FOUNDATION

B. PROPOSED USE

- 1. SINGLE FAMILY
- 2. DUPLEX
- 3. MULTI FAMILY
- 4. GARAGE
- 5. CARPORT
- 6. PORCH/INGROUND POOL
- 7. MOBILE/MODULAR HOME
(SEE E)

C. CONST. OR DEMO COST

- 1. COST OF CONST.
- A. ELECTRICAL _____
- B. PLUMBING _____
- C. HEATING/AC _____
- D. OTHER _____

TOTAL _____

D. OWNERSHIP

- 1. PRIVATE
- 2. PUBLIC

E. MOBILE/MODULAR HOME SERIAL NO.

III. SELECTED CHARACTERISTICS OF BUILDING

A. PRINCIPAL TYPE OF FRAMING

- 1. BRICK - STONE - BLOCK
- 2. WOOD FRAME
- 3. STRUCTURAL STEEL
- 4. REINFORCED CONCRETE
- 5. OTHER - SPECIFY _____

B. TYPE OF SEWAGE DISPOSAL

- 1. PUBLIC
- 2. PRIVATE PERMIT NO. _____

D. TYPE OF WATER SUPPLY

- 1. PUBLIC
- 2. PRIVATE

C. DIMENSIONS

- 1. NO OF STORIES _____ 3. BSMT SQ. FT. _____
- 2. TOTAL ACREAGE _____ 4. TOTAL SQ. FT. _____

E. NUMBER OF PARKING SPACES

- 1. OFF STREET _____
- 2. ENCLOSED _____ OUTDOORS _____

IV. RESIDENTIAL BUILDINGS ONLY

- A. NO. OF BEDROOMS _____
- B. NO. OF BATHS

 - 1. FULL _____
 - 2. HALF _____

VII. TYPE OF MECHANICAL

YES	NO
A. A/C	_____
B. ELEV	_____

IX. DIRECTIONS TO SITE FROM NEAREST INTERSECTION

V. LOCATION

- A. BUILDING SET BACK _____
- 1. FROM STREET _____
- 2. FROM SIDE LS _____ RS _____
- 3. FROM REAR _____

VIII. TYPE OF HEATING FUEL

- A. GAS D. COAL
- B. OIL E. OTHER
- C. ELEC _____

VI. CHECK OTHER STRUCTURES ON PROPERTY

- A. NONE E. BARN
- B. HOUSE F. SHED
- C. MOBILE/MODULAR HOME G. INGROUND POOL
- D. GARAGE H. OTHER SPECIFY _____

X. HIGHWAY AND ENERGY ACTS

A. HAVE YOU OBTAINED A PERMIT AS REQUIRED BY SECTION 420 OF THE STATE HIGHWAY LAW (P.L. 1242 NO. 428)? YES NO

B. HAVE YOU COMPLIED WITH ACT 222 OF THE BUILDING ENERGY CONSERVATION ACT? YES NO

XI. THE OWNER OF THIS BUILDING AND/OR UNDERSIGNED AGREE TO CONFORM TO ALL APPLICABLE

LAWS OF _____ MUNICIPALITY.

SIGNATURE OF APPLICANT

ADDRESS

DATE OF APPLICATION

SIGNATURE OF MUNICIPAL OFFICER

FEES

APPROVED REFUSED

XII. FOR MUNICIPAL USE ONLY

COMMENTS, RESTRICTIONS, DATE PERMIT EXPIRES (ACCORDING TO LOCAL CODES)

✓ Checklist for the Site Plan to be provided with the Permit Application

1. Site plans are essential and must be clearly legible and reproducible regardless of the reason for requesting the permit.
2. Use an 8 1/2" X 11" sheet of paper at minimum.
3. After locating all the structures on your property show distances in feet to the lot lines and between the structures.

Provide dimensions of the property getting the proposed improvement

- o Drawing of approx. property layout (Can use hand drawing, photocopy of survey, etc.)
- o Acreage (Refer to deed or survey drawing)
- o Approx. boundary dimensions (Can be from the deed, field measurement, or a survey drawing)
- o Parcel Number (Not mandatory – obtained from deed or property tax notice)

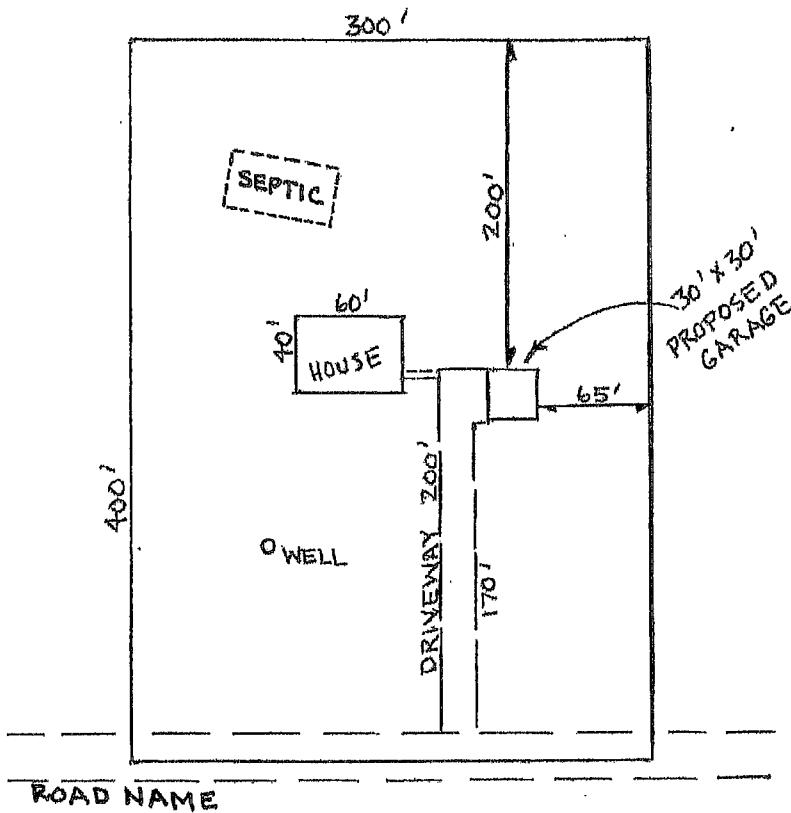
Existing Buildings / Structures with Corresponding Dimensions

<ul style="list-style-type: none">o Houseso Shedso Barnso Swimming Pools	<ul style="list-style-type: none">o Deck / Patioso Other buildings or structures on the propertyo Location of on lot well and septic IF applicable
---	--

Proposed Improvement(s)

- o Proposed Structure Dimensions (House, Shed, Barn, Addition, Deck, etc.)
- o Location of Proposed Driveway and Sidewalk

SAMPLE SITE PLAN ▶



THIS FORM REQUIRES A NOTARY SEAL

AFFIDAVIT OF EXEMPTION

The undersigned affirm that he/she is not required to provide workers compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

Property owner performing own work. If property owner does hire contractor to perform any work pursuant to building permit, contractor must provide proof of workers' compensation insurance to the municipality. Homeowner assumes liability for contractor compliance with this requirement.

Contractor has no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the municipality.

Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (attach copies of religious exemption letter for all employees).

Signature of Applicant

County of _____

Municipality of _____

Subscribed, sworn to and
acknowledged before me by the above
this _____ Day
of _____
20 _____

SEAL

Notary Public

**CUSTOMER ASSISTANCE GUIDE
BUILDING PERMIT APPLICATION SUBMITTAL REQUIREMENTS**

COMMERCIAL AND MULTI-FAMILY

- Please read all of the following information.
- The following is a check list. You must have a "checkmark" in all the sections listed below prior to submitting your application

_____ Sub-division and land development approval, if required.

Plan Review options:

_____ Plans may be submitted electronically (**Preferred Method**) by going to our website, www.mdia.us, and click on Offices, click on Plan Review and then Submit Plans. If using the electronic method, once the plans are approved, they will be returned to the design professional and it will be their responsibility to make as many hard copies as needed and provide them to the BCO and the municipality so the permit can be issued. No permits will be issued and construction **shall not start** until all applicable fees are paid. It is then required that a completed set of stamped plans be on the jobsite and made available to the field inspector during the construction.

OR

- _____ 3 (three) complete paper sets of sealed drawings, including specification books from a PA registered design professional that show in detail code compliance for all work proposed.
- _____ A site plan showing the outside dimensions of the proposed structure, including distances in feet to the front, sides and rear property lines.
- _____ Sewer permit.
- _____ Workers' compensation insurance certificate or an affidavit of exemption.
- _____ Location of parking spaces, accessible routes, public transportation stops and other required accessibility features.
- _____ Highway access permit Penn Dot/Municipal, if required.
- _____ Plan review/fee (permit clerk will calculate).
- _____ Automatic fire sprinkler system designed in accordance with NFPA 13 where applicable.
- _____ Completed building permit application.

MDIA will review plans submitted to determine code compliance. If the minimum submittal requirements are not met, we will ask the applicant to supply additional information. If the minimum requirements are met, the plans will be marked "approved". A building permit will be issued and the applicant will be notified of the inspection fees and when they can pick-up the permit at the Municipal Building. All fees shall be paid prior to the issuance of the permit. Then use the inspection procedures provided to have all of the required inspections performed.

INSPECTION PROCEDURES COMMERCIAL AND MULTI-FAMILY CONSTRUCTION

- Building permit must be posted on the site of the work and clearly visible from the road until completion of the project.
- Your approved plans must be available at all times for inspection. These are the plans that were submitted with your application and were marked "Approved" by the building code official.
- **DO NOT schedule an inspection if the work is not ready!!!!**
- When scheduling an inspection, you must supply a permit number to the inspector.

**PLEASE GIVE THREE (3) WORKING DAYS ADVANCE NOTICE
FOOTING INSPECTION WILL BE GIVEN PRIORITY**

MIDDLE DEPARTMENT INSPECTION AGENCY, INC.

BEFORE DIGGING CALL 811 – SEE ATTACHED BROCHURE

Safe digging is no accident!

Know what's below.

Dial 8-1-1 before you dig.



TEMPORARY MARKING GUIDELINES	
WHITE	Proposed Excavation
PINK	Temporary Survey Markings
RED	Electric Power Lines, Cables, Conduit and Lighting Cables
YELLOW	Gas, Oil, Sewer, Petroleum, or Granular Materials, Hazardous Materials
ORANGE	Concrete, Asphalt, Stone or Bricks, Glass, Ceramic, Concrete and Trade Lanes
BLUE	Potable Water
PURPLE	Reclaimed Water, Irrigation and Sewer Lines
GREEN	Sewer and Drain Lines

The following information is needed when you call PA One Call System:

YOUR TELEPHONE NUMBER

YOUR MAILING ADDRESS

COUNTY - The name of the county where the work will take place

MUNICIPALITY - City, Township or Borough where the work will take place

THE ADDRESS WHERE THE WORK WILL TAKE PLACE

THE NEAREST INTERSECTING STREET TO THE WORK SITE

THE NAME OF A SECOND INTERSECTION NEAR THE WORK SITE

IS THE PROPOSED EXCAVATION AREA (WORK SITE) MARKED IN WHITE - Yes or No

OTHER INFORMATION THAT WOULD HELP THE LOCATOR FIND THE SITE - Clarity information to specify the location of the proposed digging

THE TYPE OF WORK BEING DONE

WHETHER THE WORK WILL TAKE PLACE IN: Street, Sidewalk, Public or Private Property

THE APPROXIMATE DEPTH YOU ARE DIGGING

THE EXTENT OF THE EXCAVATION - The approximate size of the opening; the length and width or diameter

THE METHOD OF EXCAVATION - How will the earth be moved

WHO IS THE WORK BEING DONE FOR

PERSON TO CONTACT IF THE UTILITIES HAVE QUESTIONS

THE CONTACT PERSON'S PHONE NUMBER - The phone number and area code for daytime contact

THE BEST TIME TO CALL

FAX NUMBER AND/OR EMAIL ADDRESS - The responses from the utility owners will be sent to you

SPECIFIC EXCAVATION DATE AND START TIME - not less than 3 business days or more than 10 business days

DURATION OF A JOB - How long will the job take

ANY ADDITIONAL REMARKS YOU MAY HAVE

You will be given a 10 digit serial number as confirmation of your call and our system will send you the responses from the utilities on the date of your scheduled excavation date via fax or email.

What do we do?

We are the "Call before you dig" company for all of Pennsylvania. If you plan to disturb the earth with powered equipment, you are required by Pennsylvania law to notify the underground utility companies of your intent to do so. Notification occurs by calling 8-1-1 or 1-800-242-1776, 24 hours of the day, every day of the year. Notification can also be done on our website at www.paonecall.org.

We will then notify the utility companies nearby of your intent to dig. The utility companies are responsible to mark where their underground lines are located with colored flags, paint or chalk.

Please Note:

PA One Call does not mark utility lines. To ensure safety, the utility companies will mark their lines. It is the responsibility of the excavator to respect these markings and to dig carefully. If you are planning to dig near a utility line, please contact the utility company directly for information on how to proceed.

Why should you call?

Safe digging is no accident! If you are installing a fence or deck, or digging for a mailbox post, patio or other excavation project, it is important to know what's below. Dial 8-1-1 or 1-800-242-1776 before you dig. The utility companies do not want an accident, either. The best way to learn where underground utility lines are located is to call before you dig.

For more information, visit www.pa811.org



Know what's below.
Dial 8-1-1 before you dig.



www.pa811.org

Homeowner Quick Tips

- One easy phone call to 8-1-1 three to ten business days before digging begins helps keep your neighborhood safe.
- Call on Monday or Tuesday if you plan to dig on Saturday or Sunday.
- The utility companies will mark where their underground lines are located with colored paint, flags or chalk.
- Do not remove the flags if you see them in your yard.
- Our service is no cost to homeowners.
- Did you hire someone to install your fence, deck or new patio? Ask to see the PA One Call 10 digit number before allowing them to dig your job by hand.

The Excavator's Responsibility

- Dial 8-1-1 or 1-800-242-1776.
- Do not allow anyone to excavate on your property without calling.
- Always look for the markings on the ground before your dig date.
- If you do not see markings, do not allow anyone to dig. Wait for the lines to be marked by the utility.
- Whoever places the call will receive an email or fax with a list of facility owners who have marked or have not marked. Pay attention to this message.
- Respect the markings by not removing flags or disturbing the actual markings.
- Exercise care around the marked lines by hand digging.
- If you notice any damage to the markings, report it to the utility companies.
- Report missing or disturbed markings to the utility companies.

CONSTRUCTION DOCUMENTS REQUIRED

- Site plan showing to scale the size and location of all new construction and all existing structures on the site. Distances from lot lines, established street grades and proposed finished grades. All parking including accessible spaces with signage. Accessible paths to entrances.
- COMPLETED BUILDING PERMIT APPLICATION
- ARCHITECTURAL
- STRUCTURAL
- ELECTRICAL
- MECHANICAL
- PLUMBING
- ACCESSIBILITY (Details and elevations of restrooms, checkout counters, etc. and routes with elevations for all accessibility)
- ENERGY CALCULATIONS WITH HVAC & LIGHTING (COM CHECK OR IECC)
- ALL SIGNAGE (TACTILE EXIT, RESTROOM, ETC.)
- USE GROUP(S) (EACH AREA OR ROOM) (IBC. Chapter 3)
- BUILDING LIMITATION (HEIGHT & AREA) (IBC. Chapter 5)
- TYPE OF CONSTRUCTION (IBC. Chapter 6)
- FIRE RESISTANT MATERIALS & CONSTRUCTION (IBC. Chapter 7)
- FIRE PROTECTION SYSTEM(S) (IF REQUIRED) (IBC. Chapter 9)
- OCCUPANT LOAD (EACH AREA OR ROOM) (IBC. Section 1004)
- DEPARTMENT OF HEALTH APPROVAL FOR HEALTH CARE FACILITIES PRIOR TO SUBMISSION.
- SPECIAL INSPECTIONS AS PER IBC SECTION 1704 & 1710.

THIS FORM REQUIRES A NOTARY SEAL

AFFIDAVIT OF EXEMPTION

The undersigned affirm that he/she is not required to provide workers compensation insurance under the provisions of Pennsylvania's Workers' Compensation Law for one of the following reasons, as indicated:

Property owner performing own work. If property owner does hire contractor to perform any work pursuant to building permit, contractor must provide proof of workers' compensation insurance to the municipality. Homeowner assumes liability for contractor compliance with this requirement.

contractor has no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the municipality.

Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (attach copies of religious exemption letter for all employees).

Signature of Applicant

County of _____

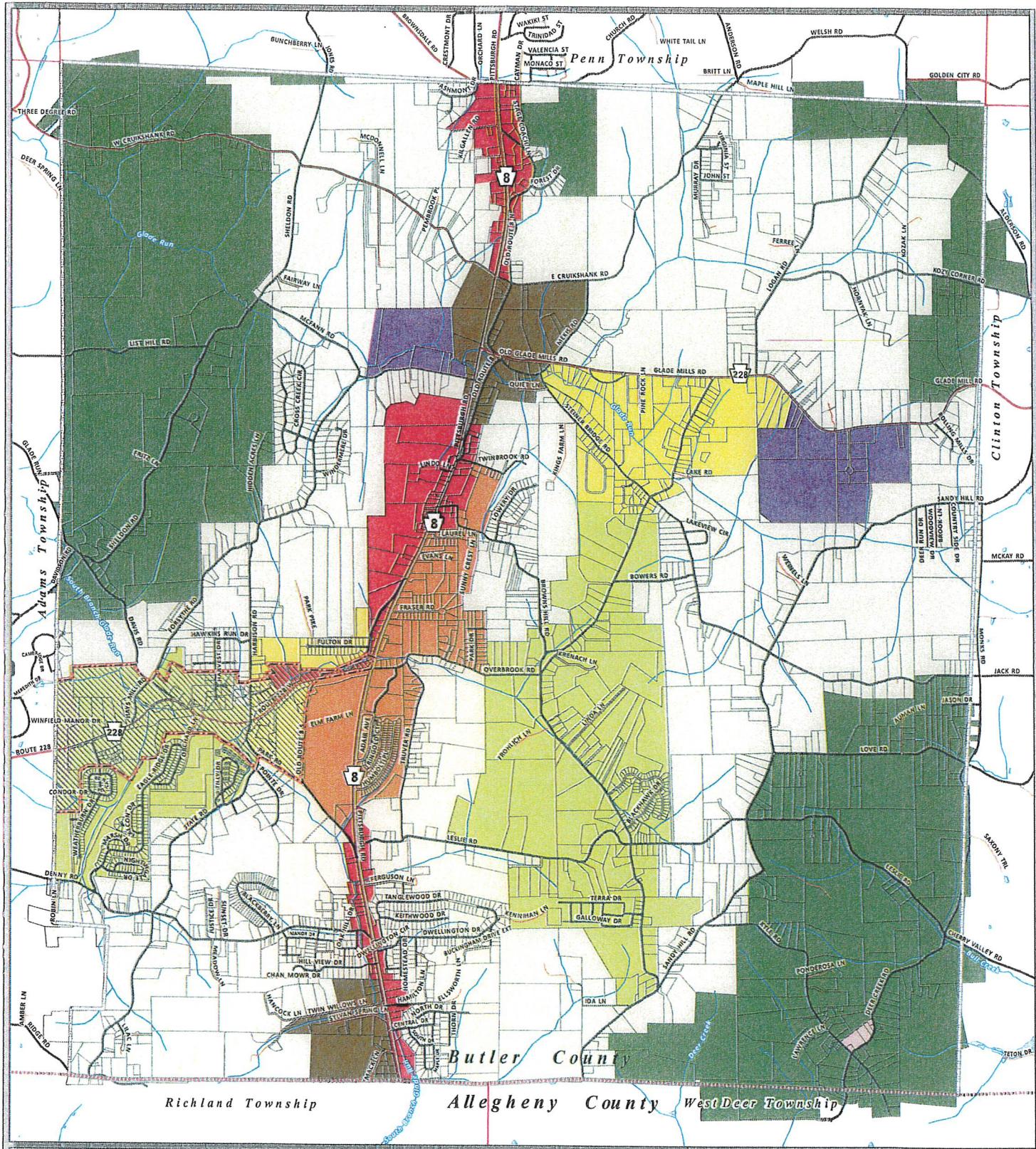
Municipality of _____

Subscribed, sworn to and
acknowledged before me by the above

this _____ Day
of _____
20 _____.

SEAL

Notary Public



Legend

County Boundary

Municipal Boundary

State Road

Township Road

Private Lane

Parcel boundary

Existing Zoning

Rural Residential (AG-A)

Agricultural (AG-B)

Low Intensity Residential (R-1)

Moderate Intensity Residential (R-2)

Town Center (TC)

Neighborhood-Scale Commercial (C-1)

Community-Scale Commercial (C-2)

Regional-Scale Commercial (C-3)

Restricted Industrial (I-1)

Rt 228 Corridor Commercial and Mixed Use Overlay District

Zoning Map

Middlesex Township

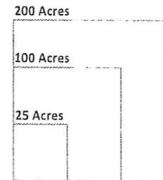
133 Browns Hill Road
Valencia, PA 16059



NORTH
May 2022

Amended on November 21, 2012
by ordinance No. 125.

Prepared by: Environmental Planning and Design, LLC
Modified by: Herbert, Rowland & Grubc, Inc.



Amended on November 21, 2012
by ordinance No. 125.