NON-RESIDENTIAL BUILDING & ZONING PACKAGE





Township of O'Hara



325 Fox Chapel Road • Pittsburgh, PA 15238 • Telephone: 412-782-1400 • Fax: 412-782-4530

Welcome to the Township of O'Hara Building Permit Process. Attached is a building permit application that will need to be filled out for your project.

We are here to help with any questions you may have. Please do not hesitate to call us or to request a meeting with one of our building professionals to go over your application prior to submission or to answer any questions during the project's life.

We strive to turn applications around as quickly as possible. Please know that by Pennsylvania State Law, we have 30 days to process a building permit. Applications are reviewed in the order they are submitted, so please allow time for the review process before you schedule the start of your project(s).

Remember to call ahead for inspections so that your project runs smoothly. We would request that you call at least 48 hours in advance to schedule an inspection. A listing of all needed inspections is included in your packet.

We always hope that all projects run smoothly, but if there are any issues that arise they will be communicated to you clearly so that they can be addressed. We will do our best to work with you so that the project continues to move forward.

At the end of your project, we would appreciate it if you would fill out the satisfaction survey that is attached to your building permit package. The survey is also included on our website under documents and forms as part of the downloadable building permit package. By completing the survey, you can help us identify ways to possibly streamline our process or allow staff members to know they are doing a great job.

Happy Building!

Sincerely, Julie A. Jakubec, CPA, CGMA Township Manager



TOWNSHIP OF O'HARA NON-RESIDENTIAL BUILDING PERMIT APPLICATION

| 1. | LOCATION OF PROPERTY | | | |
|-----|--|----------------------|--|----------------------------------|
| | Development Name | Street # | Street Name | Suite # (If applicable) |
| 2. | DESCRIPTION OF BUILDING/STRUCTUR | E TO BE CONS | | |
| 3. | TYPE OF PERMIT(S) REQUESTED: (CHECK ALL THAT APPLY) | DING 🗆 MECHA | | |
| 4. | CHECK ONE OF THE FOLLOWING THAT New Non Residential Structure Interior Build-out of new space | APPLY: | Interior Alterations of e Footer/Foundation Only | |
| 5. | SPECIAL INSPECTIONS REQUIRED - CH SOILS CONCRETE WELDING BOILER | ECK ALL THAT | APPLY: BOLT TIGHTENING EIFS ELEVATOR MISCELLANEOUS | |
| 6. | ESTIMATED COST OF CONSTRUCTION | \$ | | |
| 7. | (OWNER NAME) | 8. | (CONTRACTOR/COMPA | NY) |
| | (Street Address) | | (Street Address) | |
| | (City, State, & Zip Code) | | (City, State, & Zip Code) | |
| | (Phone) (Fax) | | (Phone) (Fa | ax) |
| | (Email) | | (Email) | |
| 9. | (ENGINEER/ARCHITECT NAME) | | | |
| | (Street Address) | | | |
| | City, State & Zip Code) | | | |
| | (Phone) (Fax) | | | |
| | (Email) | | | |
| 10. | WORKER'S COMPENSATION CERTIFIC | ATE PROVIDED | WITH THIS APPLICATIO | N 🗆 YES 🗆 NO |
| | APPLICANT IS EXEMPT (NO EMPLOYEE | S - <u>Exemption</u> | I FORM COMPLETED W/A | APPLICATION) |
| 11. | I hereby acknowledge the information co provisions of the O'Hara Township Code | | | hereby agree that all applicable |
| | APPLICANT'S SIGNATURE | | DATE | |
| | PRINT NAME | | E-MAIL ADD | RESS |

(FOR TOWNSHIP USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE)

| Lot & Block #: | BUILDING USE CLASSIFICATION: |
|--|------------------------------|
| ZONING DISTRICT: | TOTAL SQ. FT: |
| NUMBER OF STORIES <u>:</u> DESC OF CONST ACTIVITY: | ZHB CASE # IF APPLICABLE: |
| | FLOODPLAIN: 🗆 YES 🗆 NO |
| CONDITIONS OF ISSUANCE: | |
| FEES: Building Permit Fee: Occupancy Permit Fee: | Street Opening Fee: |

| Applicant completes items 1 – 11 of the Non-Residential Building Permit Application |
|--|
| Applicant provides O'Hara Township with a copy of Workers Compensation Certificate naming O'Hara Township as a certificate holder or files an Affidavit of Exemption. |
| Provide three (3) complete sets (hard copies) and one (1) digital copy (CD) of building plans and specifications with registered design, professional seal and signature, which has been reviewed and approved by O'Hara Township's contracted Plan Review Agency. |
| Submit soil report, structural calculations, fire suppression, shop drawings and calculations for review and approval. |
| Applicant to submit completed fire prevention survey form. |
| The application is received and checked for completeness. The applicant will be notified of incomplete applications. |
| The application will be reviewed for compliance with Township Code Chapter 455 (Zoning). |
| Applicant must indicate which 3 rd party or special inspections are required. |
| Applicant will be notified of permit approval and applicable fees. Permit will be issued and valid upon payment of fees. |



TOWNSHIP OF O'HARA PROPOSED USE APPLICATION NARRATIVE Please print all information

| Complete | the below proposed use narrative and submit with building permit application. |
|----------|---|
| | Business name |
| | Exact nature of business |
| | Days of business |
| | Hours of business operation |
| | Number of employees |
| | Materials/products/supplies used in conjunction with business |
| | List hazardous materials used or manufactured (MSDS sheets are required) |
| | |
| | Does the business operation require reporting to the U.S. EPA? Yes No |
| | Address of business main office |
| | Phone number |
| | Alarm system Burglar Fire |
| | Monitoring Company |
| | Address |
| | Phone |
| | Contact Person |
| | Emergency contact name Phone number |
| | Gross square footage of tenant space |
| | |



TOWNSHIP OF O'HARA FIRE PREVENTION SURVEY

| | | | | | DATE | |
|-------------------------|------------------|----------------|-----------------|---------------|-------------|--------------------|
| Name of Establishm | ent | | | | Location | |
| Address | | | | | Suite # | |
| Business phone | | | | | | |
| | | | | | | |
| Nature of Business | | | | | | |
| Emergency contact | | | | | | |
| | (Name) | | | | (Home Phor | ne #) |
| | | | Cocurrent | | | μ) |
| Emorgonov contact | | | □ Occupant | | (Cell Phone | #) |
| Emergency contact | (Name) | | | | (Home Phor | ne #) |
| | | | □ Keyholder | | | |
| | | | Occupant | | (Cell Phone | |
| ICC type of Construe | | | | | | |
| | | | | | | als |
| Number of stories | | Number of floo | rs | Baser | | |
| | | | | | | _ No. of Stairways |
| Use Group | | | | | | |
| Notes to Fire | | | | | | |
| Department | | | | | | |
| Fire Protection Equ | | | | | | |
| Automatic Sprin | | 🗆 Full | □ Partia | I □ Nor | ne | |
| Number of riser | rs | | Type of system: | Wet | Dry | Combination |
| Fire Departmer | nt Connection (y | /es/no) | Size and ty | pe of connect | ion | Location |
| Standpipes & H | lose Cabinets (| yes/no) | Location _ | | | |
| Fire Alarm Syst | tem (yes/no) | | Smoke Detector | | Heat Det | |
| | | | Pull Stations | | Duct Det | ectors |
| Fire Alarm Panel Lo | cation: Remo | te Panel | | | | |
| - | Main F | Panel | | | | |
| | | | | | | |
| | | | | | | |

| Faciliti | es with cooking appliances: Hood provided (yes/no) | Automatic H | ood suppression pro | vided (yes/no) |
|----------------|--|----------------------|------------------------|--------------------------|
| | Last test date of hood suppression system: _ | | | |
| Utilitie | s: Electric Pane Gas Shut | el Location | ation | |
| Building | Water ous Materials Stored/Processed? g Placarded? ve Materials? If yes, what type? | □YES □YES □YES | □NO □NO □NO | |
| Flamm Flamm | able liquids (i.e.: Gal. Above ground) able liquids (i.e.: Gal. Below ground) | | | |
| List of I | | | | _ Quantity _ Quantity |
| Provide | e complete list for additional items. Check her | | | _ Quantity |
| Knox B | ox provided (yes/no)I | f yes, list locat | ion of box | |
| <u> </u> | (FOR TOWNSHIP USE ONLY | - PLEASE DO | NOT WRITE BELO | W THIS LINE) |
| | Site plan provided on 8 $\frac{1}{2}$ x 11 sheet Floor plan layout provided on 8 $\frac{1}{2}$ x 11 sheet | | | |
| | Fire Prevention Survey complete MSDS Sheets provided for HAZMAT | | | |
| | Locations of Knox Box, Fire Alarm panels, sp | rinkler valves, | fire hydrants, etc. on | plans. |
| Permits | s required: | | | |

COMMERCIAL BUILDING PLAN REVIEW PROCEDURE

- Completed building permit application.
- Two (2) complete sets of building plans and specifications which have been approved by O'Hara Township's contracted Plan Review Agency.
- All construction documents required for a building permit shall be prepared by a registered design professional consistent with the professional registration laws of the state of Pennsylvania.
- When the proposed work is minor in nature and has no effect on the structural integrity of an existing building, and is in compliance with all other provisions of this code and have been approved by the Building Official plans need not be prepared by a licensed engineer, or registered architect provided such plans are drawn to scale and contain sufficient detail and clarity that the work will be of sound construction and in compliance with the provisions of this code.
- Upon receipt of submittal, the Township will perform an administrative review of the submission for completeness.
- Permit applicant shall provide written responses, item by item, for review comments and revise plans and specifications to meet code compliance.
- Applicant shall submit two (2) complete sets of revised plans, specifications and written response to plan review comments.
- Township may require new or revised structural calculations to be submitted for review if necessary to determine code compliance.
- If plan review comments are minor in content and require no plan or specification revisions, then the applicant may provide a written response from the plans and specification preparer for the comments.
- Once it has been determined by the Township that the plans and specifications are code compliant, the plans and specs are stamped approved and one set of documents for construction are returned to applicant with building permit issuance. These approved plans <u>must</u> be retained on-site as a reference for construction.

| GROUND SNOW LOAD | WIND SPEED* (mph) | SEISMIC DESIGN CATEGORY | SUBJECT TO DAMAGE FROM | | WINTER ICE SHIELD DESIGN UNDER- CATEGORY LAYMENT | | FLOOD HAZARDS | AIR FREEZING INDEX | MEAN ANNUAL TEMP | | |
|------------------------|-------------------------|-------------------------------|------------------------|------------------------|--|-------------|------------------|--------------------------|------------------------|-----------------|-------|
| LOAD | (mpn) | CATEGORI | WEATHERING | FROST LINE DEPTH | TERMITE | DECAY | CATEGORY | REQUIRED | | INDEX | LIVIE |
| 25 | 90 | А | SEVERE | 36" | MOD/ HVY | SLT/ MOD | 0-20 | YES | FEMA | 1500 OR LESS | 50 |

CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA



Township of O'Hara

Permit #_

Address

REQUIRED NON-RESIDENTIAL INSPECTIONS

48 HOURS NOTICE IS REQUIRED!

Please call the inspection scheduling line at (412) 782-1400.

Α. FOOTER: prior to concrete pour when rebar is in place. **B. FOUNDATION:** made after foundation is constructed and prior to backfilling. C. CONCRETE FLOORS: prior to concrete pour. D. REINFORCED MASONRY - as block or poured concrete walls are prepared and after steel reinforcement is installed. E. STEEL: after erection and installation is complete. (Special inspection required) ELECTRICAL, SERVICE, ROUGH WIRING AND FINAL: performed by the Township Inspection F. Agency. - Electrical Inspections ONLY-_____ SERVICE CONNECTION Call – John Donati ROUGH WIRE #724-591-1780 FINAL ELECTRICAL G. ROUGH FRAMING: prior to closing in and concealment of framing. H. GREASE TRAP: Visual **ENERGY CONSERVATION** Ι. J. PLUMBING AND MECHANICAL ROUGH-INS: prior to concealment. (ABOVE GROUND) K. FIRE BLOCKING ND DRAFTSTOPPING: when completed. L. FIRE LINE: Visual and hydrostatic test of all pipe, valves and hydrants from tee or valve to double check backflow prevention device. Hydrostatic testing performed by contractor. Μ. FIRE PROTECTION AND FIRE DETECTION SYSTEMS: shall be witnessed by O'Hara Township. All Fire Protection/Detection/Suppression systems that are taken out of service must be reported to 412-782-1400. N. FINAL SEWER & WATER: Final site inspection of meter spread, remote meter, curb box, valve box, manhole, and fire hydrants. Final inspection from Allegheny County Health Department must be presented. (All sanitary and storm sewer taps must be witnessed by O'Hara Township). O. FINAL & ACCESSIBILITY: walk-through inspection is made after construction is completed, final electrical inspection verified, and structure is made ready for occupancy. Ρ. ADDITIONAL INSPECTIONS MAY BE REQUIRED AS CONSTRUCTION PROGRESSES.

Also, please have copies of all third party inspections such as concrete cylinder testing, welding inspections, soils testing reports, and on site erection/installation inspection approvals sent to O'Hara Township.

Please note that the above listing is for reference and that all work performed must comply with all Township codes and approvals, and State and Federal requirements.

Signature_

Date_

Addendum to Building Permit

- I. The applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):
 - Certificate of Insurance (please attach)
 - Certificate of Self-Insurance (please attach)
 - Affidavit of Exemption
- II. If an exemption is being claimed, please complete the following; and sign in the presence of a notary public:

Basis for exemption (check one):

- Applicant is an individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act. Please explain:
- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain:
- Other Please explain:

| Name of Applicant: | | |
|---|---------------------------|----------|
| Address: | | |
| City: | State: | Zip Code |
| — Applicant's federal or state employer iden | ntification number (EIN): | |

- 1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
- 2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
- 3. Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

| COMMONWEALTH OF PENNSYL | VANIA) | My si |
|---|----------------------|-------------|
| | | this b |
| COUNTY OF ALLEGHENY |) | stater |
| to | | the p |
| | | falsifi |
| On this day of | , 20, | |
| before me, | , notary public, the | |
| undersigned personally appeared | | |
| | | Signa |
| know to me (or satisfactorily proven) to be the | • • • • • | |
| name(s) is/are subscribed to the within instr | ument, and | |
| acknowledged that he/she/they executed the | e same for the | Name |
| purposes therein contained. | | |
| | | Title |
| In witness whereof, I hereunto set my hand | and official seals. | |
| | | Name |

My signature on behalf of or as the contractor/applicant for his building permit constitutes my verification that the statements contained here are true, and that I am subject he penalty of 18 Pa. C.S.A. §4904 relating to unsworn alsifications to authorities.

| Sigr | nature | | | |
|-------|-----------|----------|--|--|
| Nar | ne (Pleas | e Print) | | |
| Title | e | | | |

Name of Company

Notary Public

Pennsylvania League of Cities and Municipalities Note: Applicant's Copy to be attached to permit and posted. Municipality's Copy to be filed with its permit copy.

MUST BE SIGNED IN THE PRESENCE OF NOTARY.

THIS FORM MUST BE SIGNED BY THE OWNER OF THE PROPERTY

PERMIT AGREEMENT

In consideration of the issuance by the Township of O'Hara (the "Township") of a building or grading permit to the undersigned applicant (the "Applicant"), the Applicant acknowledges that, in reviewing plans and specifications, in issuing permits, and in inspecting work of the Applicant, employees of the Township are only performing their duties to require compliance with the minimum requirements of the applicable Township code pursuant to the police power of the Township, and are not warranting to the Applicant or to any third party the quality or adequacy of the design, engineering or work of the Applicant. Applicant further acknowledges that it will not be possible for the Township to review every aspect of Applicant's design and engineering or to inspect every aspect of Applicant's work. Accordingly, neither the Township nor any of its elected or appointed officials or employees shall have any liability to the Applicant for defects or shortcomings in such design, engineering or work, even if it is alleged that such defects or shortcomings should have been discovered during the Township's review or inspection.

Furthermore, the Applicant agrees to defend, hold harmless and indemnify the Township, its elected and appointed officials and employees from and against any and all claims, demands, actions and causes of action of any one or more third parties arising out of or relating to the Township's review or inspection of the Applicant's design, engineering or work or issuance of a permit or permits, or arising out of or relating to the design, engineering or work done by Applicant pursuant to such permit or permits. All references in this Agreement to Applicant include Applicant's employees, agents, independent contractors, subcontractors or any other persons or entities performing work pursuant to the issuance of the building or grading permit by the Township.

Property Owner Signature

Building Permit No./Job Location

Date Permit Issued/Type of Work

Grading Permit No.

Date Permit Issued

THIS SIGNED FORM IS TO BE RETURNED TO THE TOWNSHIP OFFICE FOR RECORD

BUILDING PERMIT PROCESS SURVEY

Please evaluate the following questions on a scale of 1 to 5, with 5 being excellent and 1 being poor:

| 1. | Township staff was helpful during the permit submission process. | |
|----|--|--|
| 2. | Your permit was issued in a timely manner. | |
| 3. | Questions were answered completely and timely by Township staff. | |
| 4. | Township staff was professional during all needed inspections. | |
| 5. | All inspections were performed timely. | |

Additional comments or suggestions:

| Optional: |
|----------------------|
| Name: |
| Address: |
| Phone: |
| Project Description: |

Would you like to receive a follow-up phone call from the Township Manager regarding your project experience with the Township staff? _____ Yes _____ No

Please email the completed survey to: <u>info@ohara.pa.us</u> Mail or drop off at: 325 Fox Chapel Road, Pittsburgh, PA 15238