

**THORNBURY TOWNSHIP  
ELECTRICAL PERMIT APPLICATION**



Electrical Plans are required for all work.  
Thornbury Township requires that ALL permit applications be submitted simultaneously.

**JOB ADDRESS** \_\_\_\_\_

**Property Owner Name & Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Contractor Name & Address**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**eMail:** \_\_\_\_\_

**eMail:** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Phone** \_\_\_\_\_

**PA HIC#** \_\_\_\_\_ **Exp date:** \_\_\_\_\_

**Type of Work:**

- RESIDENTIAL
- COMMERCIAL
- ALTERATION
- RENOVATION
- REPAIR
- NEW CONSTRUCTION

**DESCRIPTION OF WORK**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Estimated Cost of Job \$** \_\_\_\_\_

**BEFORE YOU DIG, CALL: PENNSYLVANIA ONE CALL AT: 1-800-242-1776**  
**PA ONE Call id #:** \_\_\_\_\_

**Applicant's Signature** (Must be a Registered Master Electrician)

**Date**

\_\_\_\_\_

\_\_\_\_\_

I hereby certify that the statements contained herein are true to the best of my knowledge and belief. I understand that this permit will be issued only for that work listed. I understand that additional information or permits may be required.

**DO NOT WRITE BELOW THIS LINE**

**Permit Fee \$** \_\_\_\_\_ **PA UCC Fee:\$** \_\_\_\_\_ **Total: \$** \_\_\_\_\_

**Building Code Official:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Thornbury Township  
6 Township Drive  
Cheyney, PA 19319

**AUTHORIZATION**

(When APPLICANT is not the owner of record, the following must be completed by the owner, and submitted with the permit application.)

I (We) \_\_\_\_\_  
(name)

\_\_\_\_\_  
(address, phone number)

owners of the property located at: \_\_\_\_\_  
(site address)

do hereby authorize: \_\_\_\_\_  
(contractor's name)

\_\_\_\_\_  
(address, phone number)

for the following work: \_\_\_\_\_

\_\_\_\_\_  
**(owner's signature)**

\_\_\_\_\_  
**(print name)**

**WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION**

**TO BE COMPLETED BY ALL APPLICANTS**

**NOTE: Under State Law, the Township is responsible to stop all work on any site when non-exempt parties are working without Workers' Compensation Insurance and/or non-exempt parties have not completed and submitted to the Township the proper exemption form.**

**SITE ADDRESS:** \_\_\_\_\_

**A. The APPLICANT is a contractor within the meaning of the Pennsylvania Workers' Compensation Law:**

\_\_\_\_\_ **YES** \_\_\_\_\_ **NO**  
(If YES, skip Section D. If NO, skip Section C)

**B. Name of APPLICANT:** \_\_\_\_\_

**Federal or State Employer ID No.:** \_\_\_\_\_

**C. Insurance Information - to be completed by contractors only:**

**Applicant is a qualified self-insurer for workers' compensation:**

\_\_\_\_\_ **CERTIFICATE ATTACHED**

**Name of workers' compensation insurer:** \_\_\_\_\_

**Worker's compensation insurance policy no.:** \_\_\_\_\_

**Policy expiration date:** \_\_\_\_\_

\_\_\_\_\_ **CERTIFICATE ATTACHED**

**OVER.....**

**(ALL APPLICANTS MUST SIGN AND FILL IN NAME, ADDRESS AND PHONE NUMBER ON REVERSE SIDE OF THIS FORM)**

**D. Exemption - If APPLICANT is a contractor claiming exemption from providing Workers' Compensation Insurance or the owner of the property, Section D shall be completed.**

The undersigned swears or affirms that he/she is not required to provide Workers' Compensation insurance under the provisions of the Pennsylvania Workers' Compensation Law, for one of the following reasons:

\_\_\_ Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this permit unless contractor provides proof of insurance.

\_\_\_ Contractor is a member of a Corporation and has claimed exemption from such Corporation through PA Dept. of Labor & Industry (copy of exemption notification shall be attached).

\_\_\_ APPLICANT is a registered partnership through the State of Pennsylvania.  
(Proof of partnership should be attached.)

\_\_\_ APPLICANT is the property owner, and understands that if he/she hires other parties or subcontractors, such parties or subcontractors shall submit acceptable insurance information or proof of exemption thereof to the applicant before commencing any work on the property.

\_\_\_ Religious exemption under the Workers' Compensation Law.

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Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone No.: \_\_\_\_\_

THORNBURY TOWNSHIP  
DELAWARE COUNTY  
6 TOWNSHIP DRIVE  
CHEYNEY, PA 19319-1020

(610) 399-0844



**THORNBURY TOWNSHIP, DELAWARE COUNTY  
UNIFORM CONSTRUCTION CODE INSPECTION PROCEDURE**

Phone: 610-399-8383 x101 or 103 Fax: 610-399-3162 email: susan@thornbury.org



**INSPECTIONS WILL NOT BE MADE IF:**



- |  |
|--|
| <ol style="list-style-type: none"> <li>1. <b>ADDRESS</b> and/or <b>BLOCK</b> and <b>LOT</b> are not posted at street frontage.</li> <li>2. <b>APPROVED PLANS</b> are not on job site.</li> </ol> |
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**\* ORDER OF INSPECTIONS REQUIRED \***

- Footing** - Before footings are poured.
- Foundation** - Before backfilling, the following must be done: Exterior perimeter subsoil drains shall be in place and anchor bolts and/or straps approved.
- Pre Slab** – Stone and plastic in place as per IRC 2009.
- Rough Electric** – Done and approved before framing inspection scheduled.
- Rough Plumbing** – Done and approved during framing inspection scheduled.
- Framing & Mechanical** – During rough plumbing and rough electrical approval.
- Insulation** – Ceilings (R-30), walls (R-13), perimeter joist (under floor or walls of crawlspace) prior to sheetrock (R-19).
- Final Electrical**
- Final Plumbing** – Same time after Final Building
- Final Building & Fire** – ENTIRE PROJECT COMPLETE INCLUDING FINAL GRADE.

**The following paperwork is mandatory and MUST be completed before a C.O. can be issued, if applicable:**

- Water and Septic or Sewer** approval from the Thornbury Township SEO.
- Soil Conservation** approval, if required.
- Township Engineer** approval, when applicable.

**NO WORK IS PERMITTED TO BE CONCEALED UNTIL APPROVED BY THE INSPECTOR.**

<p><b><u>FORTY-EIGHT (48) HOURS MINIMUM ADVANCED NOTICE IS REQUIRED FOR ALL INSPECTIONS.</u></b>  <b><u>NO INSPECTIONS ON SATURDAYS, SUNDAYS, OR HOLIDAYS. NO SAME DAY INSPECTIONS.</u></b></p>
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**FINAL INSPECTION FOR A CERTIFICATE OF OCCUPANCY IS THE RESPONSIBILITY OF THE HOMEOWNER OR BUILDER. FAILURE TO OBTAIN A CERTIFICATE OF OCCUPANCY OR CERTIFICATE OF APPROVAL MAY RESULT IN A \$2,000.00 PENALTY ASSESSMENT.**

**NO FURNITURE, PERSONAL ARTICLES, OR THE USE OF ANY PART OF THE BUILDING IS PERMITTED UNTIL INSPECTED AND APPROVED BY THE ENFORCING AGENCY. ANY SUCH ACTION WILL CONSTITUTE OCCUPANCY WITHOUT A CERTIFICATE.**