

**THORNBURY TOWNSHIP
PLUMBING PERMIT APPLICATION**



Thornbury Township requires that ALL permit applications be submitted simultaneously.

Property Owner Name & Address

Contractor Name & Address

eMail _____

eMail _____

Phone _____

Phone _____

PA HIC #: _____ **Exp.Date:** _____

TYPE OF WORK

- RESIDENTIAL
- COMMERCIAL
- ADDITION
- ALTERATION
- NEW CONSTRUCTION
- REPAIR

Is connection to be made to PUBLIC SEWER [] Yes [] No

Building drain size _____ Above ground / Below ground

Soil Pipe Size: _____

Where does air inlet open? _____

Grade of building drain _____

TABLE OF FIXTURES

Location	Outlets	Water Closets	Bath-tub	Shower Bath	Lava-tories	Sinks	Wash Tub	Gas Fixtures	Urinals	Area Drain	Automatic Clothes Washer	Dish Washer	Domestic Water Heater	Garbage Disposal
Exterior														
Basement														
1 st Floor														
2 nd Floor														
3 rd Floor														
TOTAL														

TOTAL NUMBER OF FIXTURES: _____

PUBLIC WATER SERVICE HOOK-UP ONLY [] Yes (Please check if applicable)

Applicant's Signature (Must be a Registered Master Plumber)

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 work listed. I understand that additional information or permits may be required.

BEFORE YOU DIG, CALL: PENNSYLVANIA ONE CALL AT: 1-800-242-1776
PA One Call ID# _____

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.

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"> 1. ADDRESS and/or BLOCK and LOT are not posted at street frontage. 2. APPROVED PLANS are not on job site. |
|--|

*** 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><u>FORTY-EIGHT (48) HOURS MINIMUM ADVANCED NOTICE IS REQUIRED FOR ALL INSPECTIONS.</u> <u>NO INSPECTIONS ON SATURDAYS, SUNDAYS, OR HOLIDAYS. NO SAME DAY INSPECTIONS.</u></p>

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.