The following are the current codes enforced by West Goshen Township:

- International Building Code, 2015
- International Existing Building Code, 2015
- International Fire Code, 2015
- International Residential Code, 2015
- International Plumbing Code, 2015
- International Electrical Code, 2015
- National Electric Code, 2014
- International Mechanical Code, 2015
- International Fuel Gas Code, 2015
- International Property Maintenance Code, 2015
- Other codes as referenced by the above codes

Land development and zoning approvals must be obtained prior to plan submission.

All permit applications shall include (2) two sets of original complete plans with the original seals from architect and engineers.

NOTE: All structural plans must be signed and sealed by an Architect and/or Engineer(s).

We will review and stamp each approved set of drawings. One set will be returned at the time the permit is picked up and must be kept on site.

All submissions must be complete. A complete submission shall include Building, Mechanical, Plumbing, Use and Occupancy, and Electrical applications (if required), construction contracts and plans. (Penn Dot Highway occupancy permits must be submitted where required.) Submissions missing any of these items will be rejected at the counter, or upon review by the Building Official.

Energy Code information must be submitted with Building Permit application per submission requirements.

Information submitted via fax machine will not be accepted.

Plan review for residential permits will be 15 working days from date of complete submission.
When is a permit required?

An ordinary repair does not require a permit.

The following are not ordinary repairs:

(1) Cutting away a wall, partition or portion of a wall.
(2) The removal or cutting of any structural beam or load-bearing support.
(3) The removal or change of any required means of egress, or rearrangement of parts of a structure affecting the egress requirements.
(4) The addition to, alteration of, replacement or relocation of any standpipe, water supply, sewer, drainage, drain leader, gas, soil, waste, vent or similar piping, electric wiring or mechanical.

(a) A permit is not required for the installation, alteration or repair of generation, transmission, distribution, metering or other related equipment that is, by established right, under the ownership and control of a public utility as the term ‘‘public utility’’ is defined in 66 Pa.C.S. § 102 (relating to the definitions).

The following list of residential work is considered ordinary repairs and that does not require a permit from West Goshen Township.

I. Building Construction:
- Exterior or interior painting, papering, tiling, carpeting, flooring, cabinets, counter tops and similar finishing work.
- The term does not include swimming pools or spas except as excluded below
- Prefabricated swimming pools that are less than 24 inches deep.
- Swings and other playground equipment accessory to a one-or two-family dwelling.
- Window awnings supported by an exterior wall which do not project more than 54 inches from the exterior wall and do not require additional support.
- Replacement of glass in any window or door. The replacement glass shall comply with the minimum requirements of the ‘‘International Residential Code.’’
- Installation and replacement of a window, door, garage door, storm window and storm door in the same opening if the dimensions or framing of the original opening are not altered. The installation of means of egress and emergency escape windows may be made in the same opening, without altering the dimensions or framing of the original opening if the required height, width or net clear opening of the previous window or door assembly is not reduced.
- Replacement of existing roof material that does not exceed 25% of the total roof area performed within any 12-month period.
- Replacement of existing siding.
- Repair or replacement of any part of a porch or stoop which does not structurally support a roof located above the porch or stoop. (Enlargement of existing porch or stoop requires a Zoning Permit)
- Installation of additional roll or batt insulation.
- Replacement of exterior rainwater gutters and leaders.

The following building construction require a Zoning Permit
- Installation of an uncovered deck where the floor of the deck is no more than 30 inches above grade.
- Any agricultural building.
- Utility and miscellaneous use structures that are accessory to detached one-family dwellings having a building area less than 500 square feet. The term includes:
  1. Carports
  2. Detached private garages
  3. Greenhouses
  4. Sheds

II. Minor electrical work for the following:
- Replacement of lamps or the connection of approved portable electrical equipment to approved permanently installed receptacles.
- Replacement of a receptacle, switch or lighting fixture rated at 20 amps or less and operating at less than 150 volts to ground with a like or similar item. This does not include replacement of receptacles in locations where ground-fault circuit interrupter protection is required.
- Replacement of installed electrically operated equipment such as doorbells, communication systems and any motor operated device.
• Installation, alteration or rearrangement of communications wiring.
• Replacement of dishwashers.
• Replacement of kitchen range hoods.
• Installation of battery-powered smoke detectors.

III. The following gas work:
• Portable heating, cooking or portable clothes drying appliances.
• Replacement of a minor part that does not alter approval of equipment or make this equipment unsafe.
• A portable fuel cell appliance that is not connected to a fixed piping system and is not interconnected to a power grid.

IV. The following mechanical work or equipment:
• A portable heating appliance.
• Portable ventilation appliances.
• A portable cooling unit.
• Steam, hot or chilled water piping within any heating or cooling equipment governed under the Uniform Construction Code.
• Replacement of any minor part that does not alter approval of equipment or make the equipment unsafe.
• Self-contained refrigeration systems containing 10 pounds or less of refrigerant or that are put into action by motors 1 horsepower.
• Portable evaporative cooler.
• A portable fuel cell appliance that is not connected to a fixed piping system and is not interconnected to a power grid.

V. The following plumbing work:
• Replacement of bib valves if the replacement hose bib valves are provided with an approved atmospheric vacuum breaker.
• Refinishing of existing fixtures.
• Replacement of ball cocks.
• Repair of leaks.
• Clearance of stoppages.
• Replacement of faucets or working parts of faucets.
• Replacement of traps.
• Replacement of a water closet, lavatory or kitchen sink in an existing location.
• Replacement of domestic clothes washers and dishwashers.

VI. The following heating, ventilation and air conditioning work:
• Replacement of motors, pumps and fans of the same capacity.
• Repair and replacement of heating, supply and return piping and radiation elements, which do not require rearrangement of the piping system.
• Repair and replacement of ductwork.
• Repair and replacement of control devices for heating and air conditioning equipment.
• Replacement of kitchen range hoods with same capacity hood.
• Replacement of clothes dryers if there is no change in fuel type, location or electrical requirements.
• Replacement of stoves and ovens if there is no change in fuel type, location or electrical characteristics.

Any work not listed above requires the appropriate permit from West Goshen Township.
REQUIRED RESIDENTIAL CONSTRUCTION DOCUMENTS

All plans must be signed and sealed by the registered design professional responsible for this work.

ZONING APPROVAL: Copies of all zoning variances must be supplied at time of permits submission.

SITE PLAN: Scaled drawing, which shows the size and location of all new construction and all existing structures and impervious coverage on the site. Distances from structure(s) to lot lines and to other structures on the property.

STORM WATER MANAGEMENT: Scaled drawings for storm water quality controls showing details, size and location of facilities for all new impervious and building coverage on the site. Applicants that do not meet the requirements for storm water management exemption criterion must apply for a Soil Erosion and Sediment Control Permit.

SOILS REPORT: Results of soil investigation that determines the allowable soil bearing pressure to be used by the design professional in the foundation design. Building Official will determine if report is required.

SPECIFICATIONS: Manufacturer installation instructions for all appliances and equipment to be installed.

ARCHITECTURAL: Dimensioned plans ¼ or 1/8 in. scale for each floor level that shows room layouts and use of space. Also includes elevation views; wall sections; schedules for window, door and finishes; stair dimension and details, such as, riser height, tread width, guard/handrail height and headroom dimension. Plans must be signed and sealed by the registered design professional responsible for this work.

STRUCTURAL: Typical floor and roof framing plans. The plan(s) shall include details of connections, size of members, materials to be used, grade and species of all material, all the information required to erect the joists, beams, rafters, columns, or girders within the structure.
A registered engineer must seal all structural plans.

FOUNDATION: Included on the dimensioned plan is the allowable soil bearing pressure, the depth of the foundation, and the proposed materials to construct the foundation.

FIRE PROTECTION: When required, the construction documents may include a submission for the automatic fire suppression system, the fire alarm system, smoke control system, single/multiple station detectors.

MECHANICAL: Location, size and listed/labeled information for all equipment and appliances that comprise parts of the buildings mechanical system. Ventilation and exhaust calculations, schedules, supply and exhaust ductwork, chimney termination, materials, and any other information required to complete the buildings HVAC system.

PLUMBING: Includes isometric riser diagrams for the potable water supply and the drain waste & vent systems with the location and materials specified for all the piping and fixtures within the plumbing system. Also details of special devices (backflow preventer, grease traps, etc.) shall be shown. Storm water drainage calculations and devices shall be included in the submission. Floor drains may not be connected to the public sewer system.

ELECTRICAL: Service entrance conductors, grounding, and overcurrent protection location, material methods and methods, disconnect location and type, load calculations of all electrical devices and the location of emergency lighting & exit signs. Inspection agency must be from approved Township list.

ENERGY: All plan submissions must include energy calculations based on the International Energy Code and using the Res-Check software Program. The Program is free and downloadable from http://www.energycodes.gov/rescheck/download.stm

NOTE: See the PLAN SUBMISSION STANDARDS section for additional requirements.
Residential Inspection Requirements

West Goshen Township Code Enforcement Department

1. A minimum of **48 hours notice** shall be provided to the Building Inspector for the purpose of scheduling inspections.

2. Required inspections including but not limited to shall be as follows:
   a. Footings, walls and slabs prior to placement of concrete. **Concrete shall not be released until inspection is completed.**
   b. Exterior Sheathing.
   c. ELECTRICAL, SERVICE, ROUGH WIRING AND FINAL: performed by an approved third party inspection agency. (List attached)
   d. Framing of all walls, prior to concealment. **Framing inspections will not be done until all mechanical, electrical, plumbing and fire protection material is installed.**
   e. Insulation
   f. Fire stopping and wallboard inspection.
   g. Plumbing Inspection, rough and final.
   h. Final Inspection/Use and Occupancy Inspection. This inspection must be completed prior to the occupancy of the building.

West Goshen Township may require other inspections as deemed necessary in the field.

3. Special inspections may be required for the following items:
   a. Soils
   b. Concrete Construction, including footings and slab placement, mix and proper strength
   c. Masonry
   d. Steel
   e. Welding
   f. E.I.F.S. (if applicable)

Above inspections shall be conducted by an approved inspection agency.

4. Report requirement:

   Special inspectors shall keep records of all inspections. The special inspector shall furnish inspection reports to the code official on a weekly basis, and to the registered design professional in responsible charge. All discrepancies shall be brought to the immediate attention of the contractor for correction and noted on the daily report. If the discrepancies are not corrected, the discrepancies shall be brought to the attention of the code official and to the registered design professional in responsible charge prior to the completion of that phase of the work.

   A final report of inspections documenting completion of all required special inspections and correction of any discrepancies noted in the inspections shall be submitted prior to the issuance of a certificate of occupancy. Interim reports shall be submitted periodically at a frequency agreed upon by the permit applicant and the code official prior to the start of work.

   All work shall be conducted in a professional and workmanlike manner consistent with all West Goshen Township Codes, as well as Pennsylvania and Federal Regulations.
Applications are available online at www.westgoshol.org under “Forms” or related services. To find the Code of Ordinances, go to “Links” on the homepage, then “Township Code Online”.

I. Residential Building Permit (excluding multi-unit dwellings included in Section II)

Surcharge: There is a $4.50 State Mandated Fee attached to each permit. Submit contract or estimate with permit application. Calculated at 1% of the actual cost of construction, with a minimum fee. A fee with no established minimum depicts a flat fee.

1. New Construction – Single family dwelling, semi-detached dwellings and outbuildings, including additions to residential dwellings unless otherwise stipulated: $150 Minimum
2. Mobile Homes - (includes Plumbing Fee for hookup) $125
3. Alterations, Additions, and Accessories
   Soil & Erosion Permits are required for stormwater quality control on additions more than 10% of total site area, or more than 2000 sq. ft. of additional impervious cover. $ 50 Minimum
4. New
   Plumbing, HVAC, Alarms, Sprinklers, and any permanent systems $ 100 Minimum
5. Replacement
   Plumbing, HVAC, Alarms, Sprinklers, and any permanent systems $ 50 Minimum
6. Electrical
   Inspections are performed by an approved third party agency. $ 50 Minimum
7. Re-Roofing (Structural Changes) $ 50 Minimum
8. Re-Roofing (Non-Structural) $ 50
9. Sheds $ 50
10. Fence – Permit required only if fence exceeds 6 ft. in height $ 50
11. Flagpoles – all permit fees are waived for the installation of a flagpole on a residential lot.
12. Temporary Trailers (limited to 6 months) $ 50
13. Tents (limited to 6 months) $ 25
14. Above-Ground Pool/ Hot Tubs (over 24 inches of water) $ 50
15. In-Ground Pool (requires soil & erosion permit) $ 50 Minimum
16. Electrical – required for new hookup for pools or hot tubs $ 50
17. Demolition – (fee based per structure) $ 75
18. Use & Occupancy Permit- New construction only
   No permit required for resale of residential homes. $100
19. Use & Occupancy Permit – Additions $ 50
20. Reinspections (any additional inspection beyond 2) $ 75
   If in the opinion of the Building Official, the construction for which an inspection has been requested is not ready for the inspection (beyond 2), such that the inspector has to reschedule the inspection, an additional fee shall be paid to the Township prior to the reinspection.
21. Code Violations
   Starting construction without proper permits Permit fee is doubled
Applications are available online at www.westgoshen.org under “Forms” or related services. To find the Code of Ordinances, go to “Links” on the homepage, then “Township Code Online”.

III. Special Permits/Fees*

A. Road-Opening
   1. Utility Application Fee $50
   2. General Permit Inspection Fee
      a. Surface Openings – These fees are calculated on the total linear feet of the opening being permitted within different areas fo the right-of-way. Total linear feet of opening each 100 foot increment or fraction thereof.
         1. Opening in pavement $40
         2. Opening in shoulder $20
         3. Opening outside pavement and shoulder $10

      If a longitudinal opening simultaneously occupied two or more highway areas identified in subparagraph (a), only the higher fee will be charges. Linear distances shall be measured to the nearest foot.
      b. Surface opening of less than 36 square feet (e.g., service connections performed independently of underground facility installation, pipe line repairs, each opening).
         1. Opening in pavement $30
         2. Opening in shoulder $15
         3. Opening outside pavement and shoulder $10

      If an opening simultaneously occupies two or more highway areas identified in subparagraphs (1-3), only the higher fee will be charged.
      c. Above–ground facilities (e.g., poles, guys and or anchors if installed independently of poles.
         1. Up to 10 physically connected above-ground facilities (each continuous group) $20
         2. Additional above-ground physically connected facilities (each pole with appurtenances) $2

B. Sewer Construction Permits (Call Sewer Treatment Plant at (610) 696-0900 to confirm fee).
   1. Connection
      a. New Residential $200
      b. Existing Dwelling Residential $200
      c. Commercial/Industrial $200
   2. Tapping Fee
      a. New & Existing Residential $3,871
      b. New Commercial/Industrial (per 1 EDU= 241.2 gallons) $3,871

C. On-Site Septic Pumping
   1. Administrative Fee $20
Residential Sprinklers Requirements

Required information on the Plans
- Site location
- Static water pressure at the water supply
- Description of water service line, including pipe material and diameter
- Location and Size of the water meter
- Hydraulic calculations
- Scaled drawings
- Type of pipe material used for sprinklers
- Details about each type of sprinkler used, including manufacturer, model number, temperature rating, K factor and manufacturer’s spacing requirements

Sprinkler Plan Details
- A block identifying the pipe material, total number of sprinklers, and static pressure at water supply.
- Detail illustrating the bracing and mounting methods for each type of sprinkler
- Riser details
- Identification of remote sprinkler which is the hydraulically most remote on the plans
- Dimension lines for plan review to document the correct distances were used in the calculations
- Floor plan showing all exterior and interior walls so the sprinkler coverage can be reviewed

Manufacturer Information
All relevant manufacturers’ information should be submitted along with the plans and calculations
- Data sheets for sprinklers, pipe, and fittings to confirm the items are listed for residential sprinklers.
- Manufacturer’s instructions to include installation instructions such as spacing, support, bracing and related information needed to install the items in compliance with the IRC Section P2904 or NFPA 13D.

Required Inspections
- Pre-concealment Inspection
- Final Inspection
- Flow Test (Bucket Test)
**Information for Deck Plans**

2 Sets of plans needed for all decks detailing the following:

- Site plan showing distance to rear and side property lines
- Manufacturer specifications for the pressure treated lumber*
- Manufacturer specifications for all hangers, nails screws and connectors*
- Dimensions and spacing of beams and joists
- Footing location and dimensions
- Stair detail, including rise and run
- Railing detail, including cross section details for handrails
- Guard height and details
- Details for attachment to house
- Details for connection of post and beam.
- Height of deck floor above grade

*Due to the corrosive nature of the new pressure treated lumber, all joist hangers, nails, bolts, anchors, connectors and screws must be a minimum of G185 Hot dipped galvanized or stainless steel. No Exceptions.*

Submissions must have all of the above information plus a completed permit application.
Stormwater Management Quality Controls

Provide infiltration capacity for the equivalent of one inch of runoff from all new impervious surfaces. The infiltration volume does not have to be provided in one location. However, if site conditions preclude capture of runoff from portions of the impervious area, the infiltration volume for the remaining area should be increased an equivalent amount to offset the loss. In no case should the portion of the new impervious area flowing to an infiltration facility be less than 70% of the total new impervious area.

How to Size Infiltration facility for one inch of runoff

Take the new Impervious areas square footage ($I_a$) and divided by twelve (12) to get the volume of water per cubic feet ($W_v$) required for storage for one inch of runoff. Times the volume of water per cubic feet ($W_v$) by the void ratio of the stone (#4 Ballast) which is two point five (2.5) to get the required size of the infiltration bed.

$$I_a / 12 = W_v$$

$$W_v \times 2.5 = \text{size of bed}$$

<table>
<thead>
<tr>
<th>Sq. Ft. of Impervious</th>
<th>Bed size using #4 stone</th>
<th>Sq. Ft. of Impervious</th>
<th>Bed size using #4 stone</th>
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<tr>
<td>100</td>
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<tr>
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<td>2000</td>
<td>417 cubic feet</td>
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Two sets of plans for underground infiltration facility detailing the following:

- Showing all new impervious and building coverage on site
- Size of the infiltration facility(s) including calculations
- Location of the infiltration facility(s) (All Facilities shall be positioned a minimum of twenty-five feet away from foundations with basements and a minimum of fifteen feet away from all other foundations)
- Material details (stone, fabric, pipe, overflow, etc.)
- Details of overflow and clean-out capability

All submittals with new impervious and building coverage more than 10% of the total site area, or more than 2000 square feet require a Soil Erosion and Sediment Control Permit.
SEEPAGE BED

- Width of seepage bed:
- Closet flange and floor drain grating
- 90° elbow
- Layer of filter fabric (top and sides) (not bottom)
- #4 crushed stone
- Permeable soil

Downspout
Adapter
4" rigid pipe non-perforated
10'-14'
4" rigid pipe non-perforated foundation wall
4" perf. pipe slope 1% min.
INSTALLATION OF A FENCE:

1. Fences may be erected in the required front yard provided they meet the following criteria:
   a. The fence does not exceed four (4) feet in height.
   b. The fence is not solid and instead maintains a minimum one to one ratio of open to structural areas (such as a picket fence).

   The fence must meet the road right-of-way setbacks for front yard. *(See Road Right-of-Way Setbacks)*

2. Fences may be erected in the required side or rear yard areas provided they meet the following criteria:
   a. The fence does not exceed six (6) feet in height on a residential lot and ten (10) feet in height on any other lot
   b. Such fences may be solid.

3. No permit is required prior to the erection of a fence provided the fence is less than six (6) feet in height. Any fence which is six (6) feet in height or taller requires a building permit pursuant to the procedures set forth in Section 84-67.

   **For fences six feet and over:** a permit application, along with sign and sealed plans prepared by a registered design professional must be submitted. The fence needs to be designed in accordance with ASCE 7-98 wind load provisions for 90 mph 3-second gust wind speed and seismic design category.

The following corner lot requirements apply for erection of a fence regardless of the height:

**CORNER LOT:**

If you plan to erect a fence on a corner lot, we request that you contact the West Goshen Township Police Department Traffic Safety Unit at 610-696-7400. The purpose of your call would be to set up an appointment with a Traffic Unit Officer to meet you at your property, at which time you would show the officer where you plan to erect the fence. The officer would then advise you if the site you have chosen would create a sight distance problem for drivers exiting the intersection, and if there is a problem in regard to the required distance from the corner.

**ROAD RIGHT-OF-WAY SETBACKS:**

On a lot, other than a corner lot, a fence may be erected along the front, side, or rear of yards. If the fence is erected in the front yard, it may not extend beyond the road right-of-way. You would need to check with the Township Zoning Officer or Building Official for the right-of-way of the street. For example: If the right –of-way line is 50 ft. you would measure 25 ft. from the center of the road onto your property. The fence should then be erected in back of the 25 ft.

In order to maintain both sides of the fence without going onto your neighbor’s property, we suggest that you place the fence three to five feet from your property line.
DEMOLITION OF STRUCTURES

THE CONTRACTOR OR OWNER IS RESPONSIBLE TO COMPLY WITH THE DEP ASBESTOS REMOVAL PROGRAM. THE FORMS AND INSTRUCTIONS ARE LOCATED AT http://www.dep.state.pa.us/dep/deputate/AIRWASTE/AQ/asbestos/docs/2700_fm_aq0021_inst.doc

An extermination letter must accompany any application for demolition as well as a site plan showing the properties to be demolished. All Demolition work must comply with Chapter 33 of the IBC 2006, including but not limited to:

3303.1 Construction documents.
Construction documents and a schedule for demolition must be submitted. No work shall be done until such construction documents or schedule, or both, are approved.

3303.2 Pedestrian protection.
The work of demolishing any building shall not be commenced until pedestrian protection is in place as required by this chapter.

3303.4 Vacant Lot.
Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade or in accordance with the ordinances of the jurisdiction having authority.

3303.5 Water accumulation.
Provisions shall be made to prevent the accumulation of water or damage to any foundation on the premises or the adjoining property.

3303.6 Utility connections:
Before a structure is demolished or removed, the owner or agent shall notify all utilities having service connections within the structure such as water, electric, gas, sewer and other connections.

A permit to demolish or remove a structure shall not be issued until a release is obtained from the utilities, stating that their respective service connections and appurtenant equipment, such as meters and regulators, have been removed or sealed and plugged in a safe manner.

3303.9 Adjacent to excavations
Every demolition and/or excavation shall be enclosed with a barrier not less than 6 feet high. Barriers shall be of adequate strength to resist wind pressure as specified in Chapter 16.

PROTECTION OF ADJOINING PROPERTY

3307.1 Protection required.
Adjoining public and private property shall be protected from damage during construction, remodeling and demolition work. Protection must be provided for footings, foundations, party walls, chimneys, skylights and roofs. Provisions shall be made to control water runoff and erosion during construction or demolition activities.

Pedestrian protection must be inspected before demolition commences.
Building and Zoning Permit Application Page 1 of 2

To alter, erect or use a structure, to use land in accordance with the Zoning Ordinance, Building Code, and all other pertinent ordinances of West Goshen Township, Chester County, Pennsylvania

Application for a permit to perform or construct (give description of work being done):

____________________________________________________________________________________________________________

THIS SECTION MUST BE ANSWERED: INTENDED USE OF BUILDING: __________________ COST OF CONSTRUCTION: $ __________

Site Address: __________________________________________ Tax Parcel # 52 -

Lot # ________ Subdivision/Land Development: ___________________ Phase: ________ Section: ________

Zoning District: __________________ Proposed Start Date: __________________ Square Footage: __________________

Is your property a corner lot?  □ YES □ NO

Owner: __________________________________________ Phone: __________________ Fax: __________________

Mailing Address: ___________________________________________________________________ Cell: __________________

Contractor: __________________________________________ Phone: __________________ Fax: __________________

Mailing Address: ___________________________________________________________________ Cell: __________________

Architect/Engineer: __________________________________________ Phone: __________________ Fax: __________________

Mailing Address: ___________________________________________________________________ Cell: __________________

Occupancy Type: (check one) □ Residential □ Office/Business □ Mercantile □ Assembly □ Utility
□ Industrial/Factory □ Educational □ Institutional □ Storage □ High Hazard

Type of Work: □ New Building □ Alteration □ Addition □ Repair □ Demolition □ Change in use □ Roof
□ Sprinkler □ Other

New buildings and additions that are more than 10% of the total site area, or are more than 2000 sq. ft. of additional impervious cover require a Soil and Erosion Permit for stormwater quantity control.

□ Shed – Size _______ sq. ft. Height _______ ft. Residential only - Maximum 225 sq. ft. no higher than 10 ft.

□ Pool – (Circle One) In-Ground Above-Ground – Size _______ sq. ft. Max Depth _______ ft.

Disturbing six inches or more of earth requires a Soil and Erosion Permit.

** Pool barrier requirements and electrical inspection must be approved before pool is used.**

□ Sign – (Circle One) Freestanding Wall Roof Window

Size ______________ Height ______________ Area ______________

Set Back, Right of Way ___________ Right Side ___________ Left Side ___________

Building/Site Characteristics:

Number of Residential Dwelling Units: _________ Existing, _________ Proposed

Mechanical: Indicate Type of Heating/Ventilating/Air Conditioning (i.e., electric, gas, oil, etc.) __________

Water Service: (Check) □ Public □ Private

Sewer Service: (Check) □ Public □ Private (Septic Permit # ___________________________ )
Does or will your building contain any of the following:

Fireplace(s):  Number ___________________ Type of Fuel ___________________ Type of Vent ___________________

Elevator/Escalators/Lifts/Moving walks: (Check) □ YES □ NO

Sprinkler System: □ YES □ NO

Pressure Vessels: □ YES □ NO

Refrigeration Systems: □ YES □ NO

Building/Lot Dimensions:

Existing Building Area: _______________ sq. ft. Number of Stories: _______________

Proposed Building Area: _______________ sq. ft. Height of Structure Above Grade: _______________ sq. ft.

Total Building Area: _______________ sq. ft. Area of the Largest Floor: _______________ sq. ft.

Total Impervious Area: _______________ sq. ft. Total Lot Area: _______________ sq. ft.

Percentage of Total Building area on Lot: ____________________%

Percentage of Total Impervious Area on Lot: ____________________%

I certify that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniform Construction Code) and any additional applicable codes, ordinances and regulation of West Goshen Township. I understand issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of West Goshen Township or any other governing body. I certify that the code administrator or the code administrator’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.

Applicant’s Name__________________________________________________ Phone # _______________________

Signature of Owner or Authorized Agent: ____________________________ Print Name of Owner or Authorized Agent: ____________________________

Signature of Contractor: ____________________________ Contractor Print Name: ____________________________

Building Permit Denied: Date _______________ Date Returned _______________

Reason Denied: ______________________________________________________________________________________________
_________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________

Building Permit Approved: Date _______________

Building Code Official Date Zoning Officer Date

Is this property in a flood plain? □ YES □ NO (To be filled out by office)
ELECTRICAL PERMIT APPLICATION

To alter, erect or use a structure, to use land in accordance with the Zoning Ordinance, Building Code, and all other pertinent ordinances of West Goshen Township, Chester County, Pennsylvania

Application for a permit to perform or install (give description of work being done):

Site Address: ____________________________________________ Tax Parcel # __________
Lot # __________ Subdivision/Land Development: ____________ Phase: __________ Section: __________

Zoning District: __________ Proposed Start Date: __________ Cost of Electrical Construction: $_________

Owner: ____________________________________________ Phone: __________________ Fax: _________
Mailing Address: ____________________________________ Cell: __________________

Contractor: __________________________________________ Phone: __________________ Fax: _________
Mailing Address: ____________________________________ Cell: __________________

Architect/Engineer: ____________________________________ Phone: __________________ Fax: _________
Mailing Address: ____________________________________ Cell: __________________

Plans are required unless previously submitted with General Building Permit.

Occupancy Type: (check one)  ☐ Residential  ☐ Office/Business  ☐ Mercantile  ☐ Assembly  ☐ Utility  ☐ Industrial/Factory
☐ Educational  ☐ Institutional  ☐ Storage  ☐ High Hazard

Type of Work:  ☐ New Building  ☐ Alteration  ☐ Addition  ☐ Repair  ☐ Upgrade  ☐ Change in use  ☐ Tele/Data

Service size: __________ AMP  Inspectio[n Agency: __________________________

Number of Fixtures:  Switches: __________  Smoke Detectors: __________  Lighting: __________  Receptacles: __________
Tele/Data Boxes: __________  Total Number of Fixtures: __________

I certify that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniformed Construction Code) and any additional applicable codes, ordinances and regulation of West Goshen Township. I understand issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of West Goshen Township or any other governing body. I certify that the code administrator or the code administrator’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.

Applicant’s Name ______________________________________ Phone #: __________________
Signature of Owner or Authorized Agent: __________________________ Print Name of Owner or Authorized Agent: __________________________
Signature of Contractor: __________________________ Contractor Print Name: ______________________

Permit Denied: Date __________ Date Returned __________
Reason Denied: _____________________________________________________________________________

Permit Approved: Date __________ Building Code Official ______________________ Date __________
MECHANICAL/HVAC PERMIT APPLICATION

To alter, erect or use a structure, to use land in accordance with the Zoning Ordinance, Building Code, and all other pertinent ordinances of West Goshen Township, Chester County, Pennsylvania 19380

Application for a permit to perform or install (give description of work being done): ____________________________________________________
________________________________________________________________________________________________________________________

Site Address: _______________________________________________________________________Tax Parcel # 52 -
Lot # _________ Subdivision/Land Development: ___________________________________________ Phase: ___________ Section: ___________
Zoning District: ______________ Proposed Start Date: _______________

Cost of Mechanical Construction: $_____________________________

Owner: ______________________________________________________ Phone: ________________________ Fax: _______________________
Mailing Address: _____________________________________________________________________________ Cell: _______________________

Contractor: ____________________________________________________ Phone: ________________________ Fax: ________________________
Mailing Address: _____________________________________________________________________________ Cell: _______________________

Architect/Engineer: _____________________________________________ Phone: ________________________ Fax: ________________________
Mailing Address: _____________________________________________________________________________ Cell: _______________________

I certify that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniformed Construction Code) and any additional applicable codes, ordinances and regulation of West Goshen Township. I understand issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of West Goshen Township or any other governing body. I certify that the code administrator or the code administrator’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.

Occupancy Type: (check one) □ Residential □ Office/Business □ Mercantile □ Assembly □ Utility □ Industrial/Factory □ Educational □ Institutional □ Storage □ High Hazard

Type of Work: □ New Building □ Alteration □ Addition □ Repair □ Upgrade □ Change in use

Fuel Source: Electric: _______________ Natural Gas: _______________ Propane: _______________ Oil: _______________

Applicant’s Name___________________________________________________ Phone #____________________________
Signature of Owner or Authorized Agent: ______________________________ Print Name of Owner or Authorized Agent: __________________
Signature of Contractor: ______________________________ Contractor Print Name: __________________

Permit Denied: Date _______________ Date Returned _______________
Reason Denied: ________________________________________________________________________________

Permit Approved: Date _______________ Building Code Official ______________________________ Date ___________________
PLUMBING PERMIT APPLICATION

To alter, erect or use a structure, to use land in accordance with the Zoning Ordinance, Building Code, and all other pertinent ordinances of West Goshen Township, Chester County, Pennsylvania

Application for a permit to perform or install (give description of work being done):

_______________________________________________________________________________________________________________________________

Site Address: ____________________________________________ Tax Parcel # 52 -

Lot # __________ Subdivision/Land Development: ______________________ Phase: ___________ Section: ______________________

Zoning District: __________________ Proposed Start Date: ________________ Cost of Plumbing Construction: $___________

Owner: __________________________________ Phone: __________________ Fax:

Mailing Address: __________________________________________

Contractor: __________________________________ Phone: __________________ Fax: __________________

Mailing Address: __________________________________________

Architect/Engineer: __________________________________ Phone: __________________ Fax: __________________

Mailing Address: __________________________________________

Plans are required unless previously submitted with General Building Permit.

Occupancy Type: (check one) ☐ Residential ☐ Office/Business ☐ Mercantile ☐ Assembly ☐ Utility ☐ Industrial/Factory
☐ Educational ☐ Institutional ☐ Storage ☐ High Hazard

Type of Work: ☐ New Building ☐ Alteration ☐ Addition ☐ Repair ☐ Upgrade ☐ Change in use

<table>
<thead>
<tr>
<th>TYPE</th>
<th>NUMBER</th>
<th>TYPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stacks</td>
<td></td>
<td>Fountains (drinking)</td>
</tr>
<tr>
<td>Sinks</td>
<td></td>
<td>Sump</td>
</tr>
<tr>
<td>Baths</td>
<td></td>
<td>Shower</td>
</tr>
<tr>
<td>Water Closets</td>
<td></td>
<td>Urinal</td>
</tr>
<tr>
<td>Lavatory</td>
<td></td>
<td>Dishwashing Machine</td>
</tr>
<tr>
<td>Tank and Heater</td>
<td></td>
<td>Humidifier</td>
</tr>
<tr>
<td>Laundry Tray</td>
<td></td>
<td>Garbage Grinder</td>
</tr>
<tr>
<td>Water Distribution System</td>
<td></td>
<td>Washing Machine</td>
</tr>
<tr>
<td>Floor Drains</td>
<td></td>
<td>Special Waste</td>
</tr>
<tr>
<td>Sewage Ejector</td>
<td></td>
<td>Rainwater Leaders</td>
</tr>
<tr>
<td>Miscellaneous fixtures</td>
<td></td>
<td>TOTAL</td>
</tr>
</tbody>
</table>

FLOOR DRAINS MAY NOT BE CONNECTED TO THE PUBLIC SEWER SYSTEM

A SAMPLE MANHOLE IS REQUIRED IN ALL COMMERCIAL AND INDUSTRIAL INSTALLATIONS.

I certify that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniformed Construction Code) and any additional applicable codes, ordinances and regulation of West Goshen Township. I understand issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of West Goshen Township or any other governing body. I certify that the code administrator or the code administrator’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.

Applicant’s Name ____________________________ Phone # __________________

Signature of Owner or Authorized Agent: __________________________ Print Name of Owner or Authorized Agent: __________________________

Signature of Contractor: __________________________ Print Name of Contractor: __________________________

Permit Denied: Date ________________ Date Returned ________________

Reason Denied: ______________________________________________________________________________________________

Permit Approved: Date ________________

Building Code Official __________________________ Date ________________
FIRE PROTECTION PERMIT APPLICATION

To alter, erect or use a structure, to use land in accordance with the Zoning Ordinance, Building Code, and all other pertinent ordinances of West Goshen Township, Chester County, Pennsylvania

<table>
<thead>
<tr>
<th>Application for a permit to install/erect/alter:</th>
<th>Sprinkler System</th>
<th>Fire Alarm</th>
<th>CO2</th>
<th>Kitchen Hood</th>
<th>Dry Chemical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clean Agent</td>
<td>Standpipe</td>
<td>Paint Booth</td>
<td>Tent</td>
<td>Foam</td>
<td>Halon</td>
</tr>
</tbody>
</table>

Application for a permit to perform or install (give description of work being done): ____________________________________________________

Site Address: _______________________________________________________________________ Tax Parcel #: 52 -

Sq. Ft. of work area: __________________ Proposed Start Date: __________________________ Cost of Construction: ___________________________

Owner: ______________________________________________________ Phone: ____________________ Fax: ____________________

Mailing Address: _____________________________________________________________________________ Cell: _______________________

Contractor: ______________________________________________________ Phone: ____________________ Fax: ____________________

Mailing Address: _____________________________________________________________________________ Cell: _______________________

Architect/Engineer: ______________________________________________________ Phone: ____________________ Fax: ____________________

Mailing Address: _____________________________________________________________________________ Cell: _______________________

Occupancy Type: (check one)  □ Residential  □ Office/Business  □ Mercantile  □ Assembly  □ Utility  □ Industrial/Factory  □ Educational  □ Institutional  □ Storage  □ High Hazard

<table>
<thead>
<tr>
<th>Sprinklers:</th>
<th>Type of System (circle)</th>
<th>Wet</th>
<th>Dry</th>
<th>Pre-Action</th>
<th>Deluge</th>
<th>Limited Area</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type of Work (circle)</td>
<td>New</td>
<td>Relocate</td>
<td>Modify</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Heads: ____________</td>
<td>System Demand: ____________</td>
<td>Standpipe(s): ____________</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hydraulically Calculated: _________________</td>
<td>Pipe Schedule: _______________</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Fire Alarm:</th>
<th>Monitored (circle)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monitoring Company_________________________</td>
<td>Phone Number_________________________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Audible/ Visual Devices______________</td>
<td>Number of Pull Stations______________</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Smoke Detectors___________________</td>
<td>Number of Heat Detectors____________</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I certify that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and PA Act 45 (Uniformed Construction Code) and any additional applicable codes, ordinances and regulation of West Goshen Township. I understand issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of West Goshen Township or any other governing body. I certify that the code administrator or the code administrator’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.

Applicant’s Name____________________________________________________ Phone #: ____________________________________________________________

Signature of Owner or Authorized Agent: __________________________________________ Print Name of Owner or Authorized Agent: ________________________

Signature of Contractor: __________________________________________ Contractor Print Name: ________________________

Permit Denied: Date _______________ Reason Denied: __________________________

Permit Approved: Date _______________

__________________________    ________________    ________________    ________________
Zoning Officer (For tents only)                                             Date                                 Fire Code Official                                                                   Date
Offer to Install Automatic Fire Sprinkler System in One- or Two-Family Home

My builder has given me the option of having an automatic fire sprinkler installed in my new home in accordance with the provisions of section R313.2.1 of the 2009 International Residential Code.

My builder has provided to me information on the initial and ongoing costs of installation and maintenance of the system. I understand that my cost to have an automatic fire sprinkler system installed in my new home will be $_________. I understand that certain additional costs may be required in the future to maintain the system.

My builder has provided to me information as made available by the Office of the Pennsylvania State Fire Commissioner about the possible benefits of installing an automatic sprinkler system in my home. My builder has informed me that the information may also be found at the Pennsylvania State Fire Commissioner’s website, www.osfc.state.pa.us

After considering both the costs and the benefits of installing an automatic fire sprinkler system in my new home, I have elected to:

(  ) Accept the offer for the installation of an automatic sprinkler system in my home for the price specified above.

(  ) Not have an automatic fire sprinkler system installed in my home.

____________________________________  ________________________________________
Buyer                                                                 Location of New Home

____________________________________  ________________________________________
Buyer                                                                 Builder

____________________________________  ________________________________________
Date                                                                 Date

Buyer Information PLEASE PRINT CLEARLY                                                                 Builder Information PLEASE PRINT CLEARLY

Name _________________________________  Name _________________________________
Address _______________________________  Address _______________________________
City/Zip _______________________________  City/Zip _______________________________
Telephone ______________________________ Telephone _______________________________
Property Information

Property Address: ____________________________
Zoning District: ____________________________ Tax Parcel No.: ____________________________

Owner Information

Owner Name: ________________________________
Address: __________________________________
Phone Number: ______________________________

Applicant Information

Applicant Name: ____________________________
Home Address: ______________________________
Phone Number: ______________________________

Section A: Residential (Fee: New Construction - $100, Additions/Alterations - $50)

Subdivision/Development Name: ____________________________
Lot No.: ________ Settlement Date: ____________
*Name of New Owner: ____________________________ Phone #

Section B: Commercial/Industrial/Medical Service/Office Park

(New Construction - $150, Existing Building, Change of Use/Tenant - $75)

*Name of Owner of Property: ____________________________ Phone #
*Name of New Tenant: ____________________________ Phone #

Must submit a condo/lease line plan from an approved subdivision/land development.

If owner cannot provide, submit a plan showing lease lines, existing uses per unit, parking, and square footage.

Sq. Ft. of building or portion being used: ________________ No. Parking Spaces Provided: ________________
Describe Current Use: ____________________________
Describe Proposed Use: ____________________________
Retail Sales: Yes No Are Sprinklers Installed? Yes No
Will change require additional alterations, renovations, or fit out? Yes No
If yes, please file appropriate permit applications.

Settlement or Lease Date: ________________

TO BE FILLED OUT BY OFFICE

Zoning Use Approved: Yes No Comments: ____________________________
Zoning Officer Initials: ____________________________

Use & Occupancy in accordance with Chapter 3 IBC Codes: ____________________________
Type of Construction as defined in Chapter 6 of IBC Code: ____________________________
Design Occupancy Load per table 1004.12 IBC Code: ____________________________
Electrical Inspection Agency: ____________________________

Date: ____________________________
Building Official or Fire Marshal Initials: ____________________________

Associated Permits:
Building # ____________________________ Plumbing # ____________________________
Electrical # ____________________________ HVAC # ____________________________
Fire Protection # ____________________________ Sewer Connection # ____________________________
Zoning # ____________________________
Other # ____________________________
A. The Applicant is

A contractor within the meaning of the Pennsylvania Workers’ Compensation Law.

☐ YES  ☐ NO

If the answer is “yes”, complete Sections B and C below as appropriate.

B. Insurance Information

Name of Applicant ____________________________________________

Federal or State Employer Identification No. _________________________

Applicant is a qualified self-insurer for workers compensation.

☐ Certificate attached

Name of Workers’ Compensation Insurer ____________________________

Workers’ Compensation Insurance Policy No. _________________________

☐ Certification attached

Policy Expiration Date ____________________________

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing workers’ compensation insurance.

The undersigned swears or affirms 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.

☐ Contractor with 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 township.

☐ Religious exemption under the Workers’ Compensation Law.

Subscribed and sworn to before me this

_______ day of ________ 19____

________________________
(Signature of Notary Public)

My commission expires: __________________________

Address __________________________

County of __________________________

Municipality of __________________________

Signature of Applicant __________________________
How to Implement
the "Contractor Proof" Provision
of the Workers' Compensation Reform Act
Act 44 of 1993
Effective August 31, 1993

The Workers’ Compensation Reform Act was signed into law as Act 44 of 1993 by Acting Governor Mark Single on July 2. The new law takes effect on August 31.

Included in the act is a provision that requires all municipalities that issue building permits to require proof of workers' compensation insurance prior to issuing a building permit to a contractor or to require an affidavit stating that the contractor does not employ other individuals, and therefore, is not required to carry workers' compensation insurance. An affidavit, by statutory definition, must be notarized.

The Building Permit

Under the act, each municipality must modify its building permit to include the name of the contractor, workers' compensation policy number, the name of the insurance company, and the contractor's federal or state employer identification number (EIN), in addition to any information required by the municipality in its ordinance. If the contractor signs an affidavit stating that he has no employees and is not required to carry workers' compensation insurance, the building permit must then state the contractor's federal or state employer identification number and a notation that the contractor has no other employees and does not carry workers' compensation insurance and that the contractor is not permitted to employ any individuals to perform work under the building permit.

As proof of insurance, the township should require the contractor to supply either directly or through the contractor's insurer or agent a workers' compensation certificate, which includes the effective date of the coverage and the signature of the insurer. This certificate must be kept on file with the building permit.

A sample addendum to your building permit application is enclosed. A copy of this form or similar document could be attached as an addendum to your township's current building permit or the information incorporated into the form when the township prints a new building permit. This form is a sample only. Please be sure to consult your township solicitor for guidance in complying with this requirement of the law. The township is required to obtain all information on Part A of the form as part of the building permit. If a contractor is exempt from providing workers' compensation insurance coverage, the affidavit of exemption section (Part B) must be completed and notarized.

Applications By Non-Contractors

Act 44 does not address building permit applications for non-contractors. There is nothing in the act or in the court decisions that offers guidance to townships on issuing building permits to property owners who may or may not hire a contractor to perform some or all of the work. Under Act 44, the following seems to be clear:

- Property owner applicants are not "contractors" within the meaning of the Workers' Compensation Law.
- The language of the act requiring townships to obtain certificates of workers' compensation coverage refers only to "contractors".

We conclude, therefore, that townships are not required to obtain such certification from a property owner as a pre-condition to issuing a building permit.

May a township require such certification from a non-contractor property owner? Without this law, townships' power to inquire into or enforce the workers' compensation obligations of private parties is highly doubtful. Act 44 establishes a responsibility for contractors only. Therefore, requiring workers' compensation coverage by non-contractor applicants would be an intrusion by the township into an area where it has no legal authority.

It is our conclusion that workers' compensation coverage certification may not required of non-contractor applicants. We recognize that this interpretation makes the implementation of an already burdensome law even more awkward for
townships. Further, in the absence of legislative or judicial clarification, this law is susceptible to divergent interpretations. You should consult with your Township Solicitor before taking action.

Expiration or Cancellation Of Insurance

Contractors must notify their workers' compensation insurer of each municipality in which they will be seeking building permits as a workers' compensation policy certificate holder. Insurers issuing policies that name of municipality as a certificate holder must notify that municipality of the expiration or cancellation of any such policy of insurance within three working days of the date of expiration or cancellation. Upon the receipt of such notification from the insurer, the township must issue a stop-work order to a contractor who is performing work.

Also, if a township receives actual notice that a building permittee who has filed an affidavit of exemption from workers' compensation insurance has hired employees to perform work under the building permit and has not obtained the required insurance, the township must issue a stop-work order. The stop work order shall stay in effect until proper workers' compensation coverage is obtained for all work performed under the building permit and the township receives proper documentation of such coverage.

Contractors Working For A Township

Under Act 44 and Section 805 of the township Code, the same provisions that apply to contractors seeking building permits apply to any contractor performing work for a public body or municipality. All contractors and subcontractors must provide proof of workers' compensation insurance to the township effective for the duration of the contract. Upon receiving notice that the contractor's workers' compensation insurance has expired or been canceled or that the affidavit of exemption is not longer accurate, the township shall declare the contract to be null and void.

Liability For Enforcement

All responsibility for notifying the township of the expiration or cancellation of a contractor's workers' compensation insurance rests with the contractor and his insurance carrier. The law specifically states that there is no municipality liability for the enforcement of this provision.

The term "proof of insurance" means a certificate of insurance or self-insurance demonstrating current coverage and compliance with the requirements of this act. Proof of insurance is not required if:

- The contractor qualifies for an exemption for religious reasons (such as the Amish) under the Workers' Compensation Act.
- The language of the art requiring townships to obtain certificates of workers’ compensation coverage refers only to “contractors”.

We conclude therefore, that townships are not required to obtain such certification from a property owner as a pre-condition to issuing a building permit.
Approved Third Party Electrical Inspection Agencies

- All Safe Electrical Inspections
  311 Spruce St.
  West Reading, PA 19611
  610-396-9620

- American Inspection Agency Inc.
  342 Miller Road
  Sinking Springs, PA 19608
  610-678-4336

- Atlantic Inland
  A Bureau Veritas Company
  857 Sussex Blvd.
  Broomall, PA 19008
  610-543-3925
  877-392-9445

- Code Inspections Inc.
  409 S. Providence Rd.
  Wallingford, PA 19086
  610-565-0789
  Fax 610-891-8966

- Commonwealth Code Inspection Service
  219 Long Lane
  West Chester, PA 19380
  610-692-6762
  800-732-0043

- Middle Atlantic Electrical Inspections, Inc.
  302 E Pennsylvania Blvd.
  Feasterville, PA 19053
  800-352-3457

- Middle Department Inspection Agency
  1337 West Chester Pike
  West Chester, PA 19382
  610-696-3900

- Municipal Inspection Corporation
  215-673-4435

- Penn State Inspection Agency
  3106 Polly Drummond Office Park
  Newark, DE 19711
  Ph No 302-292-2000
  Fax No 302-292-0900

- Underwriter Inspection Service
  PO Box 416
  Royersford, PA 19468
  610-495-2803

- United Inspection Agency
  35 Clayburgh Rd
  Thornton, PA 19373
  610-399-5094

- United Inspection Agency
  35 Clayburgh Rd
  Thornton, PA 19373
  610-399-5094

All companies have inspectors in our area. Work inspected by other agencies shall not be accepted by West Goshen Township.
West Goshen Township
Residential Plan Submission Checklist

The following sheet is to be completed by **general contractor or person coordinating submission** and included with all applications for permit.

**Other requirements as determined by the Code Official may be required or requested based on scope of project.**

1. Two sets of plans including
   a. Site Plan showing setbacks measurements and placement of alterations/additions
   b. Foundation Details
   c. Framing Plans including grade and species of lumber
   d. Connection details including model numbers
   e. Electrical Details
   f. HVAC Details with calculations
   g. Manufacturers Specifications
   h. Zoning decisions (if applicable)

2. Completed Building Permit Application

3. Completed Plumbing Permit Application

4. Completed HVAC Permit Application

5. Completed Electrical Permit Application

6. Completed Workman’s Compensation Information Sheet

7. Res-Check Energy Calculations

8. Insurance Certificate

Person coordinating submission:

Phone Number:

Fax Number:

Accepted by:  

Date:  

Do not write below this line