

### Application for Zoning Certificate

<b>PERMIT#</b> _____	<b>DATE</b> _____
SITE ADDRESS _____	
CITY _____	ZIP _____
TAX PARCEL # _____	

<b>OWNER</b> _____	<b>PHONE #</b> _____	
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
<b>PRINCIPAL CONTRACTOR</b> _____	<b>PHONE #</b> _____	
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
<b>ARCHITECT/ENGINEER</b> _____	<b>PHONE #</b> _____	
ADDRESS _____		
CITY _____	STATE _____	ZIP _____

SETBACKS (from corresponding property line) _____	FRONT _____	REAR _____	SIDE (L) _____	SIDE (R) _____
ZONING DISTRICT _____	LOT SIZE _____	ACREAGE _____		
PROPOSED USE OF STRUCTURE _____				
DESCRIPTION OF CONSTRUCTION _____				
_____				
TOTAL SQ. FT. OF CONSTRUCTION _____ CONSTRUCTION COST (estimated) _____				
SEWAGE	<input type="checkbox"/> PUBLIC	<input type="checkbox"/> ON-LOT		

<b>FLOODPLAIN</b> — Is the site located within an identified flood prone area? (Check One)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Will any portion of the flood prone area be developed? (Check One)	<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input type="checkbox"/> N/A
Owner/Agent shall verify that any proposed construction activity complies with the requirements of the National Flood Insurance Program and the Pennsylvania Flood Plain Management Act (Act 166-1978), specifically Section 60.3 (d).			

**ADDITIONAL PERMITS/APPROVALS REQUIRED (if applicable)**

- PETERS CREEK SANITARY AUTHORITY Approved \_\_\_\_\_
- WASHINGTON COUNTY SEWAGE COUNCIL Approved \_\_\_\_\_
- MAINTENANCE AGREEMENT FOR ON-LOT SEWAGE Approved \_\_\_\_\_
- PENNDOT HIGHWAY OCCUPANCY Approved \_\_\_\_\_
- DEP FLOODWAY OR FLOODPLAIN Approved \_\_\_\_\_

The applicant certifies 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 approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, rights-of way, flood areas, etc. 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 the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be made by the *owner* or lessee of the building or structure, or *agent* of either, or by the *registered design professional* employed in connection with the proposed work.

SIGNATURE OF OWNER OR AUTHORIZED AGENT \_\_\_\_\_

PRINT NAME OF OWNER OR AUTHORIZED AGENT \_\_\_\_\_

ADDRESS OF AUTHORIZED AGENT/APPLICANT \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE: \_\_\_\_\_

(FOR MUNICIPAL USE)

ZONING  APPROVED  DENIED  N/A

BY \_\_\_\_\_ DATE \_\_\_\_\_

COMMENTS/REASON FOR DENIAL \_\_\_\_\_

**PERMIT NO.** \_\_\_\_\_

FEES	FLAT FEE		SQ. FOOTAGE or PERCENTAGE CALCULATION		TOTAL
ZONING PERMIT	\$50.00			=	
<b>TOTAL</b>					

PAID BY:  CASH  CHECK Check No. \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

**WORKERS' COMPENSATION INSURANCE COVERAGE  
AFFIDAVIT OF EXEMPTION (must be attached to Zoning Certificate/Building Permit)**

The undersigned 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:

- Property owner performing own work.** If property owner does hire contractor to perform any work pursuant to building permit, contractor must provide proof of workers' compensation insurance to Nottingham Township. Homeowner assumes liability for contractor compliance with this requirement.
- Contractor has no employees.** Contractor is 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 Pennsylvania Workers' Compensation Law.** All employees of contractors are exempt from workers' compensation insurance. (Attach copies of religious exemption letter for all employees).

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**WORKERS' COMPENSATION INSURANCE ATTACHED**

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**ZONING CERTIFICATE INFORMATION REQUIRED**

1. Name and current address of applicant/property owner.
2. Phone number of applicant (home/work/cell).
3. Address or location of proposed structure.
4. Contractor's name, address, and phone numbers.
5. Copy of Contractor's Certificate for Workers' Compensation.
6. Copy of plot plan or property survey. The drawing must show the following: (1) location and dimensions of all existing structures on the property; (2) location and dimension of proposed structure; (3) location of well and/or septic (if existing) the front, side and rear yard distances for all existing and proposed buildings and other structures.
7. Estimated cost of construction.
8. Building Plans
9. Fees must be paid before issuance of Zoning Certificate.

### ZONING CERTIFICATE/ BUILDING PERMIT INFORMATION

1. Name and current address of applicant/property owner.
2. Phone number of applicant (home/work/cell).
3. Address or location of proposed construction.
4. Contractor's name, address, and phone number.
5. Copy of Contractor's Insurance Certificate for Workers' Compensation. An Affidavit of Exemption is needed if the applicant/owner is exempt from providing Workers' Compensation Insurance (form available at Township Office).
6. Copy of plot plan or property survey or the Washington County Block and Lot Map if plot plan or property survey is not available. The drawing must include the following: (1) location and dimensions of all existing structures; (2) location and dimension of proposed structure; (3) location of well and/or septic (if existing) the front, side, and rear yard distances for all existing and proposed buildings and other structures
7. Estimated cost of construction.
8. Copy of **approved** permit from Washington County Sewage Council for installation of a new septic system **or** if reconnecting to an existing system.
9. Copy of receipt for paid cost of tap-in fee from Peters Creek Sanitary Authority and Clairton Municipal Authority when connecting to public sewage system.
10. PennDOT Driveway Permit for State Roads (Rte. 136, Valley View, Mingo Church, Little Mingo, Venetia, Ginger Hill, Brownlee, Sugar Run and Linden Roads).
11. **2 copies of building plans.** (We keep a copy of the floor plan, including the basement and garage.)
12. Use & Occupancy Permit prior to using or "occupying" the structure. This is done by the Building Inspector at the completion of construction.

### REQUIREMENTS

1. Construction area must be staked prior to issuance of a building permit.
2. Issuance of a building permit by the Township has no effect in regard to the obligation to abide by the covenants or conditions as established by the developer.
3. A stone entrance (minimum 20 feet) is required during construction to allow for control of mud on the road.
4. A sediment control device (silt fence) must be used on all areas of the property where runoff can affect adjoining lots or the Township right of way (street surface), until such time as permanent ground cover is in place.
5. All construction vehicles doing work in the Nottingham Forest Plan for construction work on Phases 6, 7 & 8 must use the Dyers Stone Drive entrance from Venetia Road. Please inform your sub contractors of this requirement!
6. **REQUIRED INSPECTION BY PETERS CREEK SANITARY AUTHORITY.** Peters Creek Sanitary Authority must be contacted and inspect all inside sewers and exterior sewer laterals prior to backfilling. Please contact the Peters Creek Sanitary Authority Office at (724) 348-6860 for inspection, tap-in and more details.
7. **DYE TEST REQUIREMENT.** A dye test is required by Peters Creek Sanitary Authority on a newly constructed improvement to real estate that has **not** been previously occupied.
8. **DYE TEST REQUIREMENT ON STRUCTURES REQUIRING USE OF EXISTING SEWAGE SYSTEM.** On any property with an existing dwelling that is adding a structure that will require the use of an existing sewage system will require a dye test before a Use and Occupancy Permit will be issued.
9. Any time that you are tying into an existing on-lot sewage system, contact the Washington County Sewage Council at (724) 223-0504.

Name \_\_\_\_\_ Date \_\_\_\_\_