

**CUSTOMER ASSISTANCE GUIDE  
BUILDING PERMIT APPLICATION SUBMITTAL REQUIREMENTS**

**SINGLE FAMILY DWELLING  
(OTHER THAN MANUFACTURED OR INDUSTRIALIZED HOUSING)**

- Please read all of the following information.
- The following is a check list. You must have a “checkmark” in all the sections listed below prior to submitting your application.

\_\_\_\_\_ “Affidavit of Exemption” (See attached form) If you are hiring a contractor to construct your dwelling, and they have workers’ compensation, have the contractor or their insurance carrier provide us with a “Certificate of Insurance” showing proof of such. If the homeowner or a contractor without workers’ compensation is constructing the dwelling, the attached form must be completed and notarized.

\_\_\_\_\_ Sewer permit if applicable.                      \_\_\_\_\_ Septic permit if applicable.

\_\_\_\_\_ A site plan showing the outside dimensions of the proposed dwelling, including distances in feet to the front, sides and rear property lines.

\_\_\_\_\_ Three (3) sets of complete construction documents that show in detail code compliance for all of the work proposed to include but not limited to the following information;

\_\_\_\_\_ Home buyer must be given the option to have an automatic fire sprinkler system installed.

\_\_\_\_\_ If buyer chooses not to install sprinklers a detail of the basement floor ceiling assembly must be submitted. (first floor joist size, species and grade of wood)

\_\_\_\_\_ Floor plan showing sizes of all rooms.

\_\_\_\_\_ Footing detail including depth below frost line, thickness, width, and rebar.

\_\_\_\_\_ Type of foundation, showing type of masonry, waterproofing and anchorage of home to foundation.

\_\_\_\_\_ Roof rafter size – species and grade of wood.

\_\_\_\_\_ Rafter spacing (16” on center, 24” on center, etc).

\_\_\_\_\_ Thickness and type of roof sheathing.

\_\_\_\_\_ Ceiling joist size and spacing.

\_\_\_\_\_ Floor joist size and spacing.

\_\_\_\_\_ Wall sections showing top and bottom plates and headers.

\_\_\_\_\_ Location and size of all beams.

\_\_\_\_\_ Sizes of all doors.

\_\_\_\_\_ Window type – including sizes and the net clear opening dimensions of all sleeping room windows (emergency egress).

\_\_\_\_\_ Smoke alarms and carbon monoxide alarms - number and placement.

\_\_\_\_\_ Insulation – U - Values for windows, R – Values for exterior walls, attic and foundation.

\_\_\_\_\_ Heating.

\_\_\_\_\_ Plumbing.

\_\_\_\_\_ Electrical.

\_\_\_\_\_ Stairs (riser height maximum 8 ¼” tread depth minimum 9”)

\_\_\_\_\_ Stairs – handrail (height from nose of thread min 34” max 38”)

\_\_\_\_\_ Guardrail (34” minimum measured vertically from nose of thread)

\_\_\_\_\_ Width of stairs (36” minimum)

\_\_\_\_\_ Location and size of basement emergency escape opening.

\_\_\_\_\_ Wall bracing detail (material, length and fastening).

\_\_\_\_\_ Completed building permit application.

MDIA will review plans submitted to determine code compliance. If the minimum submittal requirements are not met, we will ask the applicant to supply additional information. If the minimum requirements are met, the plans will be stamped “approved”. A building permit will be issued and the applicant will be notified of the inspection fees and when they can pick-up the permit at the Municipal Building. All fees shall be paid prior to the issuance of the permit. Then use the inspection procedures provided to have all of the required inspections performed.

## **INSPECTION PROCEDURES SINGLE FAMILY DWELLING**

- Building permit must be posted on the site of the work and clearly visible from the road until completion of the project.
- Your approved plans must be available at time of the inspection. These are the plans that were submitted with your application and were marked "Approved" by the building inspection agency.
- **DO NOT schedule an inspection if the work is not ready!!!!**
- When scheduling an inspection, you must supply your permit number to the inspector.

### **MINIMUM OF 24 HOUR NOTICE REQUIRED TO MIDDLE DEPARTMENT INSPECTION AGENCY, INC.**

1. Footing inspection – To be done after forming and prior to placing of concrete.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
2. Foundation inspection – French drain and water-proofing prior to backfilling.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
3. Plumbing under slab (rough-in) done prior to placing concrete floor.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
4. Framing inspection – Done prior to insulating, but after heating, plumbing and wiring are roughed in, and prior to any exterior finishes being applied.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
5. Energy conservation.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
6. Wallboard. Only needed if there is an integral or attached garage.  
**Inspector, John Balser                      Phone, 1-800-662-6342**
7. Final inspection – When job is completely finished, prior to occupancy permit and after plumbing, mechanical and electrical.  
**Inspector, John Balser                      Phone, 1-800-662-6342**

**THIS FORM REQUIRES A NOTARY SEAL**

**AFFIDAVIT OF EXEMPTION**

The undersigned affirm 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:

\_\_\_\_\_ 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 the municipality. Homeowner assumes liability for contractor compliance with this requirement.

\_\_\_\_\_ Contractor has 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 municipality.

\_\_\_\_\_ Religious exemption under the Workers' Compensation Law. All employees of contractor are exempt from workers' compensation insurance (attach copies of religious exemption letter for all employees).

\_\_\_\_\_  
Signature of Applicant

County of \_\_\_\_\_

Municipality of \_\_\_\_\_

Subscribed, sworn to and acknowledged  
before me by the above \_\_\_\_\_  
this \_\_\_\_\_ Day of \_\_\_\_\_  
20 \_\_\_\_\_.

**SEAL**

\_\_\_\_\_  
**Notary Public**