



Hereford Township
Berks County, Pennsylvania
3131 Seisholtzville Rd.
Macungie, PA 18062
Main: (610)-845-2929 – Fax: (610)-845-0616
Website: www.herefordtownship.org

UCC Commercial Building Permit and Application Instructions

Technicon Enterprises, Inc., II is responsible for performing all Uniform Construction Code building plan review and related inspections. All building permit and inspection related questions should be directed to Technicon Enterprises, Inc., II at 610-286-1622. Scheduling of all inspections can be completed through Technicon's office by dialing 610-286-1622, ext. 0.

Listed below are some basic instructions for building permit application submission. These instructions are in addition to completion of the basic application that is attached to this cover sheet.

Commercial Building Permit Application

- All commercial building permit application must be submitted with **four (4)** complete sets of building plans. These plans should include all architectural and structural details, along with plumbing, mechanical, electrical, fire protection and accessibility details and specifications.
- **ALL BUILDING PLANS FOR COMMERCIAL PROJECTS MUST BE PREPARED, STAMPED AND SEALED BY EITHER A REGISTERED ARCHITECT OR A LICENSED PROFESSIONAL ENGINEER LICENSED IN THE COMMONWEALTH OF PENNSYLVANIA.**
- Site plans for each project must also be submitted in triplicate.
- Full engineering data and calculations must be submitted with all commercial building permit applications. These would include, but are not limited to: fire protection calculations, HVAC ventilation schedules, plumbing fixture unit calculations, fuel gas pipe sizing calculations, electrical service calculations, etc.
- An Energy Conservation Code compliance certificate or equivalent must be submitted with all applications for new construction.
- A copy of the approval letter for erosion and sedimentation control from the Berks County Conservation District should also be submitted, if applicable.
- Be advised, that the UCC permits a 30 business day review period for all commercial building permit applications. No work shall begin on any project until a building permit has been issued.
- A Certificate of Workman's Compensation Insurance must be submitted with the application.

Upon issuance of a building permit, a permit placard along with supporting documentation will be returned to the permit applicant upon payment of permit fees. The permit will detail all required inspections that are specific to the project for which the permit has been issued.



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P.O Box 225

Hereford, Pa 18056

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Website: www.herefordtownship.org

Official Use Only

Date Received: _____ Received by: _____
 Permit Fee: **to be assessed by the inspector at the time application is approved.**
 Payment Type: _____ Amount Received: _____ Date Received: _____
 Zoning Permit No.: _____ Building Permit No.: _____
 Zoning District: _____ Tax Parcel No.: _____
 Date sent to BC Assessment Office: _____ Sent by: _____

A NON-REFUNDABLE fee as per the fee schedule will be applied to this permit. A deposit against total permit fee is required at the time of application to partially cover the administrative expenses involved in application processing. This deposit is NON-REFUNDABLE. However, the deposit will be applied against the total permit fee at the time the balance of the permit is made by the applicant. Permits are not considered issued until all fees are paid. All pending permits will expire and new applications will be required if the permit is not paid for and issued within 180 days from the date approved and signed by the zoning enforcement officer.

****Notice to Applicants:** Information on this form is public information and may be accessed by third parties in accordance with and subject to the requirements of the "Open Records Law"

Is there a legal reason your information should not be shared with a third party agency or available for public inspection: Yes No — If yes, please explain: _____

UCC Commercial Building Permit

County: Berks Municipality: Hereford

Site Address: _____

Lot No.: _____ Subdivision/Land Development: _____ Phase: _____ Section: _____

Total Lot Area (Dimensions in sq. ft.) _____

Owner: _____ Phone No.: _____ Fax No.: _____

Mailing Address: _____ Cell No.: _____

Email Address: _____

Principal Contractor: _____ Phone No.: _____ Fax No.: _____

Mailing Address: _____ Cell No.: _____

Official Registration # of Contractor: _____

NOTE: To verify a contractor's registration number, visit the Pennsylvania Office of Attorney General's website at www.attorneygeneral.gov or call toll free 1-888-520-6680

Architect: _____ Phone No.: _____ Fax No.: _____

Mailing Address: _____ Cell: _____

Type of Work or Improvement: (Check All That Apply)

- New Building Addition Alteration Repair Demolition Relocation
 Foundation Only Change of Use Plumbing Mechanical Electrical
 Sign Other – Describe below

Describe the scope of work: _____

Estimated cost of construction (To Include Time & Materials): \$ _____

(Detailed estimates may be requested to verify underestimated values)

Construction Type: (IBC Chapter 6) _____



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Description of Building Use: (Check One)

Specific Use: _____

Use Group: _____

Business Name: _____

Change in Use: YES NO

If YES, indicate Former: _____

Maximum Occupancy Load: _____

Dose or will your building contain any of the following:

Fire Alarm System (Check): YES NO

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

Automatic Sprinkler System: YES NO

Building dimensions:

Existing Building Area: _____ sq. ft.

No. of Stories Existing: _____

Proposed Building Area: _____ sq. ft.

No. of Stories Proposed: _____

Total Building Area: _____ sq. ft.

Height of Structure Above Grade: _____

Gross Area of Grade Level Floor: _____ sq. ft.

Floodplain

Is the site located within an identified flood hazard area? (Check One)

YES NO

Will any portion of the flood hazard area be developed? (Check One)

YES NO

N/A

Owner/Agent shall verify that any proposed construction and/or development 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)

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.

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 provision of the code(s) applicable to such permit.

Signature of Owner or Authorized Agent

Print Name of Owner or Authorized Agent

Address

Date

Phone Number

Directions to Site: _____



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For Code Administrator Use Only

Additional Permits/Approvals Required

<input type="checkbox"/> Zoning	Approved	_____
<input type="checkbox"/> Street Cut/Driveway	Approved	_____
<input type="checkbox"/> PennDot Highway Occupancy	Approved	_____
<input type="checkbox"/> Soil Conservation	Approved	_____
<input type="checkbox"/> DEP Floodway or Floodplain	Approved	_____
<input type="checkbox"/> Sewer Connection	Approved	_____
<input type="checkbox"/> Public Water Connection	Approved	_____
<input type="checkbox"/> Other: _____	Approved	_____

Approvals

Building Permit Denied :	Date: _____	Date Returned: _____
Building Permit Approved :	Date: _____	Permit No.: _____
Code Administrator: _____		
Date Issued: _____	Date Expires: _____	Permit No.: _____
Building Permit Fee	_____	Receipt No.: _____
Zoning Permit Fee	_____	Receipt No.: _____
Plumbing Permit (if appl.)	_____	Receipt No.: _____
Mechanical Permit (if appl.)	_____	Receipt No.: _____
Electrical Permit (if appl.)	_____	Receipt No.: _____
Driveway Permit (if appl.)	_____	Receipt No.: _____
Curb and Sidewalk (if appl.)	_____	Receipt No.: _____
Certificate of Occupancy? (Yes or No)	FEE: _____	
Plan Review: (Yes or No)	FEE: _____	

MUST SUBMIT FOUR (4) SETS OF PLANS

Technicon Enterprises, Inc., II – Final Inspection Required – Call (610) 286-1622

Zoning Enforcement Officer: _____ Date Permit Approved: _____

Inspection Approved Inspection Disapproved Inspection Date: _____

(Technicon Enterprises, Inc., II – Please return Inspection information upon completion)

When scheduling inspections, the contractor must ensure he has completed all items necessary for the inspection. Should the Building Inspector/Zoning Officer be required to make additional inspections, a fee of \$80.00 will be due to defray the cost of the inspection. The entire fee must be paid prior to the inspection. The fee is paid to the Municipality.