

**THE BOROUGH OF SEWICKLEY  
BUILDING AND ZONING PERMIT APPLICATION**



Date: \_\_\_\_\_

Applicant name: \_\_\_\_\_ Phone: \_\_\_\_\_

Applicant address: \_\_\_\_\_ Email: \_\_\_\_\_

Property owner name: \_\_\_\_\_ Phone: \_\_\_\_\_

Property owner address: \_\_\_\_\_ Email: \_\_\_\_\_

Location of property: \_\_\_\_\_

Block/lot #: \_\_\_\_\_ Zoning district: \_\_\_\_\_

Current/prior use of the building/land: \_\_\_\_\_

Proposed use of the building/land: \_\_\_\_\_

Is property in a Historic District?  YES  NO Will there be any tree removal/pruning?  YES  NO

Description of the Construction: \_\_\_\_\_

Estimated Cost: \$ \_\_\_\_\_

Architect/engineer: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Builder: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Workers Compensation Information**

Insurer: \_\_\_\_\_

Name of policy holder: \_\_\_\_\_

Policy #: \_\_\_\_\_

Federal tax ID #: \_\_\_\_\_

Expiration date: \_\_\_\_\_

\*\*This applicant is responsible for obtaining required highway occupancy permits from the PA Department of Transportation

The above information is true and correct. I hereby agree that all applicable provisions of the borough codes will be complied with, as well as the requirements from the municipal water and sewage authority and the PA Department of Labor and Industry, whether specified or not.

\_\_\_\_\_  
Applicant/Agent Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

**THE BOROUGH OF SEWICKLEY  
BUILDING AND ZONING PERMIT AGREEMENT**

\*\*This form must be signed by the owner of record and the applicant\*\*

In consideration of the issuance by the Borough of Sewickley of a Building or Zoning Permit to the undersigned Applicant, the Applicant acknowledges that, in reviewing plans and specifications, in issuing permits, and in inspecting work of the Applicant, employees of the Borough are only performing their duties to require compliance with the minimum requirements of the applicable ordinances of the Borough pursuant to the police power of the Borough, and are not warranting to the Applicant or to any third party, the quality or adequacy of the design, engineering or work of the Applicant. The Applicant further acknowledges that it will not be possible for the Borough to review every aspect of the Applicant's design and engineering, or to inspect every aspect of the Applicant's work. Accordingly, neither the Borough nor any of its elected or appointed officials or employees shall have any liability to the applicant for defects or shortcomings should have been discovered during the Borough's review or inspections.

The Applicant agrees to defend, hold harmless, and indemnify the Borough, its elected and appointed officials and employees from and against any and all claims, demands, actions, and causes of action of any one or more third parties arising out of or relating to the Borough's review or inspection of the Applicant's design, engineering or work, or issuance of a permit or permits, or arising out of or relating to the design, engineering or work done by the Applicant pursuant to such permit or permits. All references in this agreement are applicable to the Applicant's employees, agents, independent contractors, subcontractors of any other persons or entities performing work pursuant to the issuance of the Building or Zoning Permit by the Borough.

Furthermore, the Applicant is hereby informed that any violation(s) of the Building Code and/or the Zoning Code for the Borough of Sewickley is subject to fines and penalties as stated in the applicable ordinance(s).

\_\_\_\_\_  
APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PROPERTY OWNER(S) SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PROPERTY OWNER(S) SIGNATURE

\_\_\_\_\_  
DATE

(Must be notarized if the property owner is not the applicant)

\_\_\_\_\_  
PERMIT #

\_\_\_\_\_  
DATE ISSUED

## **THE BOROUGH OF SEWICKLEY**

### **BUILDING AND ZONING PERMIT APPLICATION GUIDELINES**

1. All permit applications **must be completed** before it will be reviewed for Zoning and Building Code compliance. Block & Lot information and copies of the Zoning Ordinance are available at the Borough Manager's Office.
2. All applications for additions, porches, accessory structures, fences, and similar structures must include a **sealed survey** indicating applicable setbacks for all structures on the same lot.
3. Two (2) sets of building plans and/or specifications are to be submitted with the application for additions, new structures, and commercial projects. All applications that involve commercial and/or structural work must include drawings and specifications **signed and sealed** by a licensed architect or engineer. All work must comply with the 2006 International Building Code as amended by Ordinance 1223.
4. Plans for structures other than 1 & 2 family dwellings or minor renovations, must be submitted to a certified plan review agency for review and approval at the applicant(s)' expense. Details on the foundation, footer, and wall cross section must be submitted. This includes details on the fill around the footer and the plan for footer drains, and basement floor channel drains. Sizing and spacing of framing members should be included.
5. The **OWNER** of the property must sign the Permit Agreement. The Permit Agreement must be notarized if the owner is not the applicant and the owner is not able to sign the Permit Agreement in the presence of the Building Official.
6. All applications for exterior work in the Steep Slope District must comply with all rules and regulations set forth in the Zoning Ordinance.
7. Pursuant to Ordinance 1193, all new structures shall have their respective roof storm water conveyed to a borough approved storm water system. If an approved storm water system is not available, a retention pit per borough specifications shall be provided at the applicant's expense.
8. All fees are to be paid at the time in which the Permit is received. The fees for Building and Zoning Permits are as follows: **\$100.00 plus 1% x cost of the project (All construction projects)**  
**\$50.00 for all signs**
9. The Code Enforcement Officer will act upon a **completed application** for a Building or Zoning application **within 30 days** of receiving the completed application.
10. If the work described in any Permit has not begun within ninety (90) days from the date of issuance thereof, said Permit shall expire and be canceled. If the described work has not been substantially completed within two (2) years of the date of issuance thereof, said Permit and any zoning relief shall expire and be cancelled.
11. All exterior work in a designated Historic District must receive a Certificate of Appropriateness from Borough Council. Maps indicating the location of the Historic Districts are available at the Borough Manager's Office.

12. All plumbing work must be submitted and installed in accordance with the Allegheny County Health Department at (412) 578-8036.
13. It shall be the applicants' responsibility to obtain all applicable permits and approvals from the PA Department of Labor and Industry at (717) 787-3806.

NOTE: This list is not all-inclusive. The Borough of Sewickley reserves the right to add, delete, and change these requirements. Additional information and approvals may be required by the Building Department in order to approve and issue any Permits.

**All public and private construction, demolition and grading work, and related activities performed pursuant to a building permit shall be performed between the hours of 7:00 a.m. and 7:00 p.m., Monday through Saturday, and no such work shall be performed at any time on Sundays, unless the permit holder obtains written consent from the Borough Manager and/or his or her agent to do the work at an earlier or later hour, or on a Sunday. In connection with any permit, conditions may be attached by the Borough Manager and/or his or her agent to prevent damage to public or private property, or to prevent a hazardous condition, or to prevent a public nuisance including but not limited to equipment usage or storage, transportation of materials, hydra-hammer or headache ball usage, fencing of the construction site, or additional items pursuant to Ordinance # 1212.**

#### **HOMEOWNER ALERT ABOUT LEAD-BASED PAINT:**

Allegheny County Health Department – Dr. Bruce Dixon

As you may know, a federal regulation requires that owners and occupants of a house or apartment built before 1978 are given a pamphlet about lead safety before the start of any renovation work. The requirement applies to any work that will disturb a painted surface larger than two (2) square feet when the work is performed by a contractor or a landlord's maintenance staff. No requirement exists, however, for notifying homeowners who do renovation work by themselves. I am requesting that your municipality voluntarily alert owners of houses built before 1978 about lead safety when they apply for a building permit.

Homeowners expecting to disturb paint in houses built before 1978 can obtain a list of certified lead inspectors and lead abatement contractors by calling 1-888-LEADLIST or by visiting the National Lead Service Providers' Listing System web site at [www.leadlisting.org](http://www.leadlisting.org). Bruce Good, Manager of the Health Department's Childhood Lead Poisoning Prevention Program, can be contacted at the number (412) 578-7942 if your code enforcement officers have questions about lead safety or wish to obtain brochures about this subject. Residents having questions about lead safety should be directed to the Health Department's general number at (412) 687-ACHD.

**THE BOROUGH OF SEWICKLEY**  
**ADDENDUM TO BUILDING PERMIT**

**For completion by municipal official:**

**Municipality:** \_\_\_\_\_

**Date Issued:** \_\_\_\_\_

**Permit #:** \_\_\_\_\_

I. The applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):

- Certificate of Insurance (please attach)
- Certificate of Self-Insurance (please attach)
- Affidavit of Exemption

II. If a certificate of Insurance of Self-Insurance has been submitted, please complete the following:

Name of Insurer or Self-Insurer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Policy #: \_\_\_\_\_ Coverage Period Ends: \_\_\_\_\_

Name of Contractor/Policyholder: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contractor/Policyholder's Federal or State Employer Identification # (EIN): \_\_\_\_\_

1. This policy provides coverage for the requirements of the Workers' Compensation Act, the Occupational Disease Act, and, where applicable, the Federal Longshore and Harbor Workers' Compensation Act.
2. The insurer has been notified that the municipality issuing the building permit is to be named a policy certificate holder.
3. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
4. The contractor/policyholder will notify the municipality of any change in status, cancellation, or expiration of workers' compensation coverage.
5. Violation of the Workers' Compensation Act or the terms of this permit will subject the contractor/policyholder to a stop-work order and other fines and penalties as provided by law.

III. If an exemption is being claimed, please complete the following and sign in the presence of a notary public:

Basis for exemption (check one):

- Applicant is an individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.  
Please explain:  
\_\_\_\_\_

- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain:  
\_\_\_\_\_

- Other. Please explain:  
\_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Applicant's Federal or State Employer Identification # (EIN): \_\_\_\_\_

1. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
2. The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
3. Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. S4909 relating to unsworn falsifications to authorities.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Please print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Company

Pennsylvania League of Cities and Municipalities

Note: Applicant's copy to be attached to permit and posted.

Municipality's copy to be filed with its permit copy.