



RESIDENTIAL ADDITIONS

711 Saxonburg Boulevard
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Butler County, Pennsylvania

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

RESIDENTIAL ADDITIONS

(Bedroom - Family Room – Kitchen – Attached Garage - Etc)

- 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 addition, 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 addition, the attached form must be completed and notarized.
- _____ A site plan showing the proposed addition, the outside dimensions of the structure, the 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;
- _____ Floor plan showing size 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 addition 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 if applicable.
 - _____ Plumbing (if any).
 - _____ 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 if addition has basement area.
 - _____ 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 marked “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.

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