JTWP BUILDING 11-2008

CAMERON COUNTY

| Permit | Number |
|--------|--------|
| JCC- | |

OFFICE OF BUILDING CODE ADMINISTRATION

JONES TOWNSHIP, P.O. BOX 25, WILCOX, PA 15870
PENNSYLVANIA UNIFORM CONSTRUCTION CODE
BUILDING PERMIT APPLICATION

RESIDENTIAL DECK CONSTRUCTION

| | T | OWNSHIP USE ON | LY | | | | | |
|---|--|------------------------|---------------------------------|-----------------|--------------------|--|--|--|
| Tax Map Number | Parcel ID # | | Perm \$ | it Fee | Date Issued | | | |
| This Building Permit Application Building Permit for the confusion Construction Codes is issued. | nstruction, alteration, or r | epair, modification of | a residential dec | k as required b | y the Pennsylvania | | | |
| | Detail may be used in li of plans. Other types of | | | | | | | |
| BUILDING PERMIT FEES: The Permit Fee for projects utilizing the <i>Typical Deck Detail</i> is \$150.00 for all decks. Other deck projects, including decks with a covered roof, that a plan review is required is \$200.00. | | | | | | | | |
| A. PROJECT INFOR | MATION | | | | | | | |
| 1.Brief Project Descrip | tion (indicate size of deck | x) | | | | | | |
| Please indicate the type of house construction that the ledger board will be connected or attached to: Check all that apply: (Refer to the <i>Typical Deck Detail</i> for proper attachment to house.) | | | | | | | | |
| ☐ Typical Solid Sawn I | Floor Joists | Brick Veneer | ☐ Cantile | evered House | Floor | | | |
| ☐ TJI Floor Framing | □ Ор | en Web Floor Truss | es 🗌 N | Mobile Home | | | | |
| ☐ Deck attached to ho | use foundation (block r | nasonry or poured o | oncrete, includir | ng Superior W | all Systems) | | | |
| When the house-to-deck connection is to a brick veneer, mobile home, or can otherwise not be verified, the deck MUST BE FREE STANDING | | | | | | | | |
| B. OWNER INFORMA | ATION | | | | | | | |
| Site Owner (Developer) | Last Name First Na | me MI | Suffix Phone | i: | Other Phone: | | | |
| Mailing Address | | Mailiı | (<u>)</u> ng Address Line 2 | - | | | | |
| Mailing Address– City | | State | ZI | P+4 | | | | |

JTWP BUILDING 11-2008

Owner/ Agent Name (Print)

| C. | SITE INFORMATION | ON | | | | | | | |
|--|---|-------------------------------|-------------------------|---------------------------|-------------------------|-----------|--|--|--|
| | | | | | | | | | |
| Nearest State or Township maintained road: | | 911 Stree | et Address: | | | | | | |
| | | | | | | | | | |
| Site Lo | ocation City | State | <u> </u> | ZIP | Latitude | Longitude | | | |
| | | | | | | | | | |
| Dotaile | ed Written Directions | to Sito: | | | | | | | |
| Detaile | ed willen bliedions | to site. | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| D. | PRIMARY CONTR | ACTOR INFORMATION | J | | | | | | |
| Last N | | First Name | • | MI | Suffix | | | | |
| 240111 | u | T HOLT CALLED | | | Camix | | | | |
| Title | | Construction Firm | | | | | | | |
| Tille | | Construction Firm | | | | | | | |
| | | | | | | | | | |
| Mailing Address | | Mailing Ad | Mailing Address Line 2 | | | | | | |
| | | | | | | | | | |
| Addres | ss – City | | State | ZIP+4 | Country | | | | |
| | | | | | | | | | |
| Email | | Phone | | Ext. | FAX | | | | |
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| | | | | | | | | | |
| I. | OWNER CERTIF | TICTION | | | | | | | |
| OWN | IER SECTION: (To be | completed only by the propert | ty owner) | | | | | | |
| , | I hereby certify that I am the owner of the property listed on Section "B" of this Application. I understand that submission of this | | | | | | | | |
| | | ized representatives from Jon | es Township access to | this property to inspec | et and conduct tests of | the | | | |
| , | structure(s) under | | annliachta annliaction/ | a) farma(a) all an asifia | atiana and/an duawina | ·(a) aua | | | |
| 4 | I further certify that the information presented on applicable application(s), form(s), all specifications, and/or drawing(s) are accurate and true to my belief and knowledge. | | | | | | | | |
| 3 | I attest that all work will conform to all rules and regulations as adopted by the Jones Township Board of Supervisors. | | | | | | | | |
| | | | | | • | | | | |
| 1 | AGENT SECTION: (To | be completed only in the abs | ence of the property ow | vner) | | | | | |
| 1 | 1. I hereby certify that the work is authorized by the owner of record for the property indicated in Section "C" | | | | | | | | |
| 2 | 2. I further certify that the owner has authorized me to create and file this <i>Application</i> as his agent, and that I will present a true and correct copy of this certification to the Owner. | | | | | | | | |
| 9 | | lid Workers Compensation Ins | | k if ves) | | | | | |
| | | | | ··· , ••, | | | | | |

Owner / Agent Signature

Date