

# N.E.A.C.A.

## NORTH EAST AREA CODE ADMINISTRATION

Serving North East Township, North East Borough and Greenfield Township  
10300 WEST MAIN ROAD, NORTH EAST, PA. 16428  
(814)725-8606 ph\*(814)873-8606 cell\*(814)725-2419 fax  
Mon thru Fri 7:30 a.m. to 3:30 p.m.

# MINOR COMMERCIAL BUILDING PERMIT APPLICATION

### PLEASE INCLUDE

If using COMcheck for energy code you must supply 2 copies of passing certificate and inspection checklist.

Completed permit application.

Three (3) sets of drawings, including spec books.

NOTE: Prints must include:

- Floor Plan for each floor
- Basement Plan
- Elevation Plan
- Electrical Plan
- Plot Plan (on parcel) with setbacks noted

A "Zoning" or "Land Use" Permit.

- Plans will not be accepted without a valid "Zoning" or "Land Use" permit.

**Applications without contact phone numbers will not be accepted.**

TYPE OF COMMERCIAL BUILDING PERMIT (Please check one: )		
Exterior Alterations	Additions or Enclosures	Demolition of structure
Interior Alterations	Swimming Pools	Sprinkler System
Accessibility Renovations	Roof Repair/Replace	Utility Structures
Other		
Demolition: Asbestos Removal    Yes    No <b>(IF YES, YOU MUST NOTIFY DEP)</b>		

MUNICIPALITY \_\_\_\_\_  
Location where work is being performed

Application Date \_\_\_\_\_

**PA UCC ENFORCED**

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**1. PROPERTY INFORMATION**

Subdivision Name & Lot # \_\_\_\_\_

Index # \_\_\_\_\_

(you can find this on your property tax bill)

Site Address \_\_\_\_\_

Zone: Agricultural \_\_\_\_\_ Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Residential \_\_\_\_\_

**2. PROPERTY OWNER'S INFORMATION**

First Name \_\_\_\_\_ M \_\_\_\_\_ Last Name \_\_\_\_\_ Phone No \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**3. BUILDING PERMIT APPLICATION**

**Description of Work:**

ESTIMATED COST OF CONSTRUCTION: \$ \_\_\_\_\_

ESTIMATED START DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

COMPLETION DATE \_\_\_\_/\_\_\_\_/\_\_\_\_

*1 YEAR MAXIMUM WITHOUT PERMIT RENEWAL*

**4. CERTIFICATION**

I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable laws of this jurisdiction. I further certify that this information is true and correct to the best of my knowledge.

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

Address \_\_\_\_\_ Phone No \_\_\_\_\_

**5. CONTRACTOR INFORMATION**

Please list additional general contractor information on additional sheet (s) if applicable

**Name of Contractor** \_\_\_\_\_

Office #

Phone #

Cell #

**Chief Executive Officer** \_\_\_\_\_

Office #

Phone #

Cell #

**Person in Charge of Work** \_\_\_\_\_

Office #

Phone #

Cell #

Contractor Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Proof of "Workman's Compensation" Insurance \_\_\_\_\_

Proof of Liability Insurance \_\_\_\_\_

**6. SUBCONTRACTOR INFORMATION**

Please list subcontractors for major trades, use additional sheet(s) if applicable

Contractor / Trade \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone No / Cell No \_\_\_\_\_

Contractor / Trade \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone No / Cell No \_\_\_\_\_

Contractor / Trade \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone No / Cell No \_\_\_\_\_

Contractor / Trade \_\_\_\_\_ City, State, Zip \_\_\_\_\_ Phone No / Cell No \_\_\_\_\_

**PA UCC ENFORCED**

**WORK IS NOT TO BE ENCLOSED OR COVERED UNTIL INSPECTED**

**APPLICANT OR AUTHORIZED AGENT RESPONSIBLE FOR CONTACTING  
BUILDING CODE OFFICIAL FOR SCHEDULING REQUIRED INSPECTIONS.**