

NON-RESIDENTIAL BUILDING & ZONING PACKAGE



CRANBERRY
• TOWNSHIP •

visit us on our web site - www.cranberrytownship.org

Updated 10/02/2018



NON-RESIDENTIAL BUILDING PERMIT APPLICATION

1. LOCATION OF PROPERTY

Development Name _____ Street # _____ Street Name _____ Suite # (If applicable) _____

2. DESCRIPTION OF BUILDING/STRUCTURE TO BE CONSTRUCTED _____

3. TYPE OF PERMIT(S) REQUESTED:

(CHECK ALL THAT APPLY) BUILDING PLUMBING ELECTRICAL (1250) (COMPLETE ATTACHED ELECTRICAL PERMIT)
 MECHANICAL

4. CHECK ONE OF THE FOLLOWING THAT APPLY:

- New Non Residential Structure (1080) Interior/Exterior Alterations of existing tenant space (1090)
 Interior Buildout of new space (1230) Footer/Foundation Only (1220)
 Non-Residential Pool/Hot Tub/Spa (1240) Multi Family Building (Apartment building) (1210)

5. ESTIMATED COST OF CONSTRUCTION \$ _____ X .002 = REVIEW FEE \$ _____ (\$100 minimum)

(Submit check in this amount with application)

6. _____
(OWNER NAME)

7. _____
(CONTRACTOR/COMPANY)

(Street Address)

(Street Address)

(City, State & Zip Code)

(City, State & Zip Code)

(Phone)

(Fax)

(Phone)

(Fax)

8. _____
(ENGINEER/ARCHITECT/OWNER AGENT NAME)

9. _____
(OCCUPANT/BUSINESS NAME)

(Street Address)

(Street Address)

(City, State & Zip Code)

(City, State & Zip Code)

(Phone)

(Fax)

(Phone)

(fax)

Check here if Zoning Approval application is attached

10. WORKERS COMPENSATION CERTIFICATE PROVIDED WITH THIS APPLICATION YES NO

APPLICANT IS EXEMPT (NO EMPLOYEES - EXEMPTION FORM COMPLETED W/THIS APPLICATION) YES NO

11. I hereby acknowledge the information contained herein is true and correct, and I hereby agree that all applicable provisions of the Cranberry Township Codes shall be complied with.

APPLICANT'S SIGNATURE

DATE

I am the.....Circle one below:

Owner Contractor Engineer/Architect Owner agent Occupant

PRINT NAME

PHONE NO.

E-MAIL ADDRESS

To receive your Building Permit by mail: Provide a self-addressed envelope with postage, or packaging to accommodate all materials that are to be returned, with your Permit payment. Or, with an air bill and the proper payment account numbers, your materials and Permit can be returned to you via FedEx or UPS.

(FOR TOWNSHIP USE ONLY – PLEASE DO NOT WRITE BELOW THIS LINE)

AP #: _____	BUILDING USE CLASSIFICATION: _____
MAP & PARCEL #: _____	TOTAL SQUARE FOOTAGE: _____
ZONING DISTRICT: _____	BFCAB/ZHB # IF APPLICABLE: _____
NUMBER OF STORIES: _____ NAICS: _____	CONSTRUCTION TYPE CLASSIFICATION: _____
DESC OF CONST ACTIVITY: _____	FLOODPLAIN: <input type="checkbox"/> YES <input type="checkbox"/> NO

CONDITIONS OF ISSUANCE: _____

FEES: Building Permit Fee: _____	Impact Fee: _____
Occupancy Permit Fee: _____	Non-Res. Recreation Fee: _____
Plan Review Fee: _____	Misc. Improvement Fee: _____
Zoning Approval: _____	Electrical Inspection Fee: _____
*See attached zoning approval: <input type="checkbox"/> YES <input type="checkbox"/> NO	Electrical Administration Fee: _____
Code year: _____	PA State Administration Fee: <u> \$4.50 </u>
	TOTAL: _____

	BUILDING CODE OFFICIAL DATE

ELECTRICAL PERMIT APPLICATION

NON-RESIDENTIAL (1250)

_____ additional meters

All individual points of electrical outlet, such as switches, luminaries, exit signs, receptacles, etc. (not listed elsewhere on this form) must be individually accounted for in this section.

ROUGH WIRE INSPECTION

1 to 25 outlets(002)
 # _____ of additional outlets (003)

FINISH INSPECTION

1 to 25 outlets(005)
 # _____ of additional outlets(006)

EQUIPMENT - APPLIANCES

Outlet for single unit of 15K.w. or less(008)
 Each additional outlet of 15K.w. or less(009) # _____

MOTORS, GENERATORS, TRANSFORMERS, CENTRAL HEATING, DUCT HEATERS, AIR CONDITIONING, ELECTRIC FURNACES AND WELDERS

Fractional HP, KW or KVA to 1 HP, KW or KVA, ea(011) # _____
 1HP, KW or KVA to 3 HP, KW or KVA, ea(012) # _____
 4 HP, KW or KVA to 7 HP, KW or KVA, ea(013) # _____
 7 1/2 HP, KW or KVA to 29 HP, KW or KVA ea(014) # _____
 30 HP, KW or KVA to 49 HP, KW or KVA ea(015) # _____
 50 HP, KW or KVA to 74 HP, KW or KVA ea(016) # _____
 75HP, KW or KVA to 199 HP, KW or KVA ea(017) # _____
 200 HP, KW or KVA to 500 HP, KW or KVA ea(018) # _____
 Over 500 HP, KW or KVA ea(019) # _____

FEEDERS OR SUB-PANELS

Not over 200 AMP(051) # _____
 Over 200 AMP to 400 AMP (052) # _____
 Over 400 AMP to 600 AMP(053) # _____
 Over 600 AMP to 1600 AMP (054) # _____
 Over 1600 AMP (055) # _____
 Over 600 Volts per Category(56) # _____

SERVICE METER EQUIPMENT

Not over 150 AMP(061)
 Over 150 AMP to 200 AMP(062)
 Over 200 AMP to 400 AMP(063)
 Over 400 AMP to 600 AMP(064)
 Over 600 AMP to 1200 AMP(065)
 Over 1200 AMP to 1600 AMP(066)
 Over 1600 AMP to 2000 AMP(067)
 Over 2000 AMP to 3000 AMP(068)
 Over 3000 AMP(069)
 Ground Fault Protected Services(071)
 Services Exceeding 1 Meter(072)

PRIMARY TRANSFORMERS, VAULTS ENCLOSURES, SUB-STATIONS

Not over 200 KVA(076) # _____
 Over 200 KVA to 500 KVA(077) # _____
 Over 500 KVA to 1000 KVA(078) # _____
 Over 1000 KVA(079) # _____

SIGNALING SYSTEMS

Burglar Alarms, Fire Alarms, Fire Suppression Alarms
 Smoke Detectors, Telemetry
 (Telephones or CATV outlets are each separate systems)

For the system and first 15 devices(081)
 # _____ of additional devices(082)

SIGNS (Incandescent, Fluorescent & Neon)

First sign (per occupancy)(086)
 Each additional sign (per occupancy)(087) # _____

OUTLINE LIGHTING

First Transformer(091)
 Each additional transformer(092) # _____

Penn Power Work Release # _____

APPLICATION FOR NON-RESIDENTIAL BUILDING PERMIT PROCEDURE

Applicant completes items 1 - 12 of the Non-Residential Building Permit Application

- Applicant provides Cranberry Township with copy of Workers Compensation Certificate naming Cranberry Township as a certificate holder or file an Affidavit of Exemption.
- Provide proof of Department of Agriculture plan approval (for food handling).
- Provide three (3) complete sets of building plans and specifications with registered design, professional seal and signature.
- Applicant to provide an 8 ½ x 11 sheet of paper(s) showing proposed floor plan layout of tenant space drawn to scale or adequate dimensions. Floor plan must show room/space uses, room sizes, aisle way sizes, door sizes, counter areas, exits, fire extinguisher location(s).
- The application is received and checked for completeness. The applicant will be notified of incomplete applications.
- The application will be reviewed for Zoning compliance, Chapter 27; Building and Fire Prevention Code compliance, Ordinance, Chapter 5.
- Applicant must indicate which 3rd party inspections are required.
- Applicant will be notified of permit issuance, submit applicable fees, and receive permit.
- Com check for new structures/additions/new tenant buildouts
- Knox Boxes for emergency Fire Department are recommended for most occupancies and required for same. Applications are obtained through Planning & Development Services

APPLICATION FOR NON-RESIDENTIAL ZONING APPROVAL PROCEDURE

- Applicant completes the following Non-Residential Zoning Approval application**
- Provide two (2) copies of the approved site plan on an 8 1/2" x 11" sheet
- Provide two (2) copies of the floor plan layout on an 8 1/2" x 11" sheet
- Applicant provides the proposed use narrative on a separate sheet showing the *exact nature of the business activity*.
Please note: Zoning approval will not be given without providing this narrative.
- The application is received and checked for completeness. The applicant will be notified of incomplete applications.
- The application will be reviewed for Zoning compliance, Chapter 27; Building and Fire Prevention Code compliance, Ordinance Chapter 5.
- Applicant will be notified of permit issuance, submit applicable fees.
- A site inspection is required before Zoning Occupancy will be issued and any business shall commence. Please refer to all paperwork received at time of permit issuance for instructions.



Non-Residential Zoning Application (1100)

We would like to take this opportunity to welcome you as a new business to Cranberry Township. The information that is gathered within this form is for zoning verification purposes and will be entered into a database for Business Licenses that will be accessed by multiple departments within the Cranberry Township infrastructure. The only information that will be made public in our search engine on our web site is your company name, the type of business, and a location.

The following must be provided. Please check off that you've provided and/or acknowledged the following with this application submission:

- Two (2) copies of the approved site plan on an 8 1/2" x 11" sheet
- Two (2) copies of the floor plan layout on an 8 1/2" x 11" sheet
- Proposed use narrative on a separate sheet showing the *exact nature of the business activity*.
*Please note: **Zoning approval will not be given without providing this narrative.**
- Zoning approval will be issued after passing a site inspection.**

Tell us a little about your new business:

Proposed Business Name: _____
 Local street address of site: _____ Suite # _____
 Phone number for business: _____
 Web site address: _____

Name of the contact that will be responsible for updates to the Business License: _____
 Phone Number: _____

Name of lessee/contact name: Lessee/contact address: Suite #: City: State: Zip Code: Phone number: Fax number:	As Per Chapter 27, Section 402, please tell us your Authorized Use: _____ Gross square footage of space: _____ Number of employees: Full time: ____ Part time: ____
Estimated date of business opening: _____	Previous tenant of space: _____ Are relocating within the Township: yes no

(FOR TOWNSHIP USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE)

Map & Parcel # _____	NAICS _____	Zoning District _____	Fee: \$ \$50.00
Previous Tennant _____		Permitted Zoning Use _____	
_____ Code Administrator	_____ Approval Date		

AP # _____

In case of an after-hours emergency, our Public Safety departments will need the following information:

Business Name _____

Public Safety Information

ICC construction type: Length of building: Width of building: Roof material: Use group:	Number of stories: Number of floors: Basement: Number of elevators: Number of stairways:														
Knox Box provided: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list location of box: General Notes to Fire Department:	Facilities with cooking appliances Automatic hood suppression provided: <input type="checkbox"/> Yes <input type="checkbox"/> No Location of emergency pull: Last test date for hood suppression system:														
Automatic sprinkler system: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None Fire sprinkler provider: Number of risers: _____ Type of System <input type="checkbox"/> Wet <input type="checkbox"/> Dry <input type="checkbox"/> Comb Fire Department connection: <input type="checkbox"/> Yes <input type="checkbox"/> No Type of Fire Department connection: <input type="checkbox"/> 4" Storz <input type="checkbox"/> 5" Storz <input type="checkbox"/> Siamese Location: Standpipes & Hose Cabinets: <input type="checkbox"/> Yes <input type="checkbox"/> No Location:	Automatic Fire/Detection System: <input type="checkbox"/> Full <input type="checkbox"/> Partial <input type="checkbox"/> None <input type="checkbox"/> Smoke Detectors <input type="checkbox"/> Heat Detectors <input type="checkbox"/> Pull Stations <input type="checkbox"/> Duct Detectors Fire alarm System: <input type="checkbox"/> Yes <input type="checkbox"/> No Fire alarm panel location: Remote panel: Main panel: Fire Alarm provider:														
Hazardous materials stored/processed: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type: Building placarded: <input type="checkbox"/> Yes <input type="checkbox"/> No Explosive materials: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what type: Flammable liquids (ie: gallons above ground): Flammable liquids (ie: gallons below ground): Notes regarding Hazardous Materials:	Is this a staff operated 24 hour business: yes no If you answered "no" above, please fill in the hours of operation below. <table border="1" data-bbox="787 1098 1490 1325"> <tr><td>Sunday</td><td></td></tr> <tr><td>Monday</td><td></td></tr> <tr><td>Tuesday</td><td></td></tr> <tr><td>Wednesday</td><td></td></tr> <tr><td>Thursday</td><td></td></tr> <tr><td>Friday</td><td></td></tr> <tr><td>Saturday</td><td></td></tr> </table>	Sunday		Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
Sunday															
Monday															
Tuesday															
Wednesday															
Thursday															
Friday															
Saturday															
Please provide us with a building owner emergency contact in case of an emergency after business hours: Building owner emergency contact name: Building owner emergency contact phone number:	Please provide us with two people to contact in case of an emergency after business hours: First emergency contact name: First emergency contact phone number: Second emergency contact name: Second emergency contact phone number														

Utility Information -

Please provide the name of your utility providers and the panel location for emergency shut-off purposes.

Electric provider:
 Panel location:
 Gas provider:
 Shut off valve location:
 Water provider:
 Shut off valve location:

Tax Information

Business Name: _____

Any questions in reference to information requested on this page should be directed to the Cranberry Tax Administrator at 724-776-4806, extension 1171. The taxes levied by Municipal Code require anyone engaged in any business activity to register with the Municipality the following information:

Type of business entity: (Check (x) applicable category) <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other: _____	Corporate contact: Title: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____	
Federal Tax Identification Number: _____	Date business opened in Cranberry Township: Month: _____ Day: _____ Year: _____	
Mercantile or Business Privilege tax form mailing address: Attention: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____ e-mail address: _____	Earned Income & Local Services Tax (previously EMST) forms mailing address (if different from the box to the left) Attention: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____	
Name, Social Security Number, Residence Address of:		
<input type="checkbox"/> individual <input type="checkbox"/> owner <input type="checkbox"/> partner <input type="checkbox"/> corporate officer Name: _____ SS# _____ Title: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____		
<input type="checkbox"/> individual <input type="checkbox"/> owner <input type="checkbox"/> partner <input type="checkbox"/> corporate officer Name: _____ SS# _____ Title: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____		
<input type="checkbox"/> individual <input type="checkbox"/> owner <input type="checkbox"/> partner <input type="checkbox"/> corporate officer Name: _____ SS# _____ Title: _____ Street address: _____ Suite #: _____ City: _____ State: _____ Zip Code: _____ Phone number: _____ Fax number: _____		
_____ Signature	_____ Title	_____ Date

COMMERCIAL BUILDING PLAN REVIEW PROCEDURE

- Completed building permit application.
- Completed zoning approval application.
- Three (3) complete sets of building plans and specifications with all required information for plan review to determine code compliance.
- All construction documents required for a building permit shall be prepared by a registered design professional consistent with the professional registration laws of the state of Pennsylvania.
- When the proposed work is minor in nature and has no effect on the structural integrity of an existing building, and is in compliance with all other provisions of this code, plans need not be prepared by a licensed engineer, or registered architect provided such plans are drawn to scale and contain sufficient detail and clarity that the work will be of sound construction and in compliance with the provisions of this code.

The applicant for a commercial plan review for a new/altered structure shall submit a review fee as per the most current Fee Resolution. This review fee shall be submitted with application.

- Upon receipt of submittal, the Township will perform an administrative review of the submission for completeness.
- A determination will be made by Planning & Development Services as to whether review of plans will be in-house by the Department or forwarding plans to a third party agency for review.
- A commercial plan review is 10 - 30 working days depending upon complexity of plans and current workload.
- Review comment letter will be sent to applicant.
- Permit applicant shall provide written responses, item by item, for review comments and revise plans and specifications to meet code compliance.
- Applicant shall submit two (2) complete sets of revised plans, specifications and written response to plan review comments.
- Township may forward new or revised structural calculations to a third party agency for review if necessary to determine code compliance.
- If plan review comments are minor in content and require no plan or specification revisions, then the applicant may provide a written response from the plans and specification preparer for the comments.
- Prior to permit issuance, applicant is required to provide copies of Department of Agriculture for food handling.
- Once it has been determined by the Township that the plans and specifications are code compliant, the plans and specs are stamped approved and one set of documents for construction are returned to applicant with building permit issuance. These approved plans should be retained on-site as a reference for construction.
- Building permit fees: Note that the Township uses the building valuation data from ICC to determine costs per square foot for construction types

CLIMATIC AND GEOGRAPHIC DESIGN CRITERIA

GROUND SNOW LOAD	WIND SPEED* (mph)	SEISMIC DESIGN CATEGORY	SUBJECT TO DAMAGE FROM				WINTER DESIGN CATEGORY	ICE SHIELD UNDER-LAYMENT REQUIRED	FLOOD HAZARDS	AIR FREEZING INDEX	MEAN ANNUAL TEMP
			WEATHERING	FROST LINE DEPTH	TERMITE	DECAY					
25	90	A	SEVERE	36"	MOD/HVY	SLT/MOD	0-20	YES	FEMA	1500 OR LESS	50

BUILDING PLAN REVIEW REQUIREMENTS

In order to perform a thorough Building Plan Review, the following specifications, drawings and details must be submitted:

Complete signed and sealed architectural plans, structural plans and material specifications of all work.

A site plan including the following information:

1. Size and location of all new construction and all existing structures on the site.
2. Distances from lot lines.
3. Established street grades and proposed finish grades.

Architectural plans and specifications to include:

1. Description of uses and the proposed use group(s) for all portions of the building. The design approach for mixed uses (as applicable).
2. Proposed type of construction of the building.
3. Fully dimensioned drawings to determine areas and building height.
4. Adequate details and dimensions to evaluate means of egress, including occupant loads for each floor, exit arrangement and sizes, corridors, doors, stairs, etc.
5. Exit signs/means of egress lighting, including power supply.
6. Accessibility provisions.
7. Description and details of proposed special occupancies such as a covered mall, high-rise, mezzanine, atrium, public garage, etc.
8. Adequate details to evaluate fire-resistive construction requirements, including data substantiating required ratings.
9. Details of plastic, insulation, and safety glazing installation.
10. Details of required fire protection systems.

Structural plans, specifications, and engineering details to include:

1. Soils report indicating the soil type and recommended allowable bearing pressure and foundation type.
2. Signed and sealed structural design calculations which support the member sizes on the drawings.
3. Local design load criteria, including frost depth.
4. Earthquake seismic zone/effective peak acceleration coefficient.
5. Details of foundations and superstructure.
6. Provisions for required special inspections.
7. Applicable construction standards and material specifications (ie: masonry, concrete, wood, steel, etc.)

MECHANICAL PLAN REVIEW REQUIREMENTS

In order to perform a thorough Mechanical Plan Review, the following specifications, drawings and details must be submitted:

Complete signed and sealed plans and specifications of all heating, ventilating and air conditioning work.

Labeling criteria of all mechanical equipment.

Heating equipment data including the following information:

1. Equipment capacity (b.t.u.).
2. Controls
3. Appliance layouts showing location, access and clearances.
4. Disconnect switches
5. Indoor and outdoor design temperatures.

Ventilation data, ductwork and equipment including the following:

1. Ventilation schedule indicating the amount of outside air (in c.f.m.) supplied to each room or space.
2. Layout showing outside air intakes.
3. Construction of ducts, including support and sheet metal thickness.
4. Duct lining and insulation materials with flame spread and smoke-developed ratings.
5. Exhaust fan ductwork layout and termination to the outside.
6. Size of louvers and grilles for attic ventilation.

Boiler and water heater equipment and piping details including safety controls and distribution piping layout.

Gas and fuel oil piping layout, material, sizes, and valves.

Combustion air intake quantities and details.

Commercial kitchen exhaust equipment details including hood and fan drawings, details of automatic fire suppression, and clearances.

Chimney and chimney connector or vent and vent connector details and connector gages and clearances.

Mechanical refrigeration equipment data and details.

Solid fuel burning appliance details including incinerator and fireplace drawings and details.

Energy conservation equipment data and details.

PLUMBING PLAN REVIEW REQUIREMENTS

In order to perform a thorough Plumbing Plan Review, the following specifications, drawings and details must be submitted:

Complete signed and sealed plans and specifications of all plumbing work.

Plumbing fixture and piping material specifications including identification of the applicable referenced standard.

Note: all changes/installations to plumbing under the floor slab must be approved/inspected by the Sewer & Water Department.

Plumbing fixture information to include:

1. The occupant load used to determine the number of required plumbing fixtures.
2. Number and distribution based on the use group.
3. Separate facilities for each sex.
4. Accessible plumbing facilities and details.
5. Anti-scald shower valves.

Plumbing piping plan showing layout, pitch of drainage lines, cleanouts, size of traps, and riser diagram.

Water supply and distribution plan showing piping sizes, valves, water heater details and temperature-pressure relief valve with discharge pipe.

Sanitary drainage and vent system riser diagram showing drainage fixture units (dfu), sizes and vent termination details through the roof.

Potable water system riser diagram showing piping sizes and provisions for protection of potable water supply.

Piping support and installation schedule.

Storm drainage details including rain gutter or roof drain sizes and downspout/leader sizes.

Health care plumbing and fixture details.

ELECTRICAL PLAN REVIEW REQUIREMENTS

In order to perform a thorough Electrical Plan Review, the following specifications, drawings and details must be submitted:

Complete plans and specifications of all electrical work.

Labeling criteria of all electrical equipment.

Lighting floor plan including electrical circuits indicating conduit and wiring sizes.

Power floor plans including electrical circuits indicating conduit and wiring sizes, equipment and disconnect switches.

Exit sign/means of egress lighting location and power supply.

Panelboard schedule.

Lighting fixture schedule.

Symbol schedule and diagrams.

Specifications to include requirements for:

1. Raceway and conduit with fittings.
2. Wire and cable.
3. Electrical boxes, fittings and installation.
4. Electrical connections.
5. Electrical wiring devices.
6. Circuit and motor disconnects.
7. Hangers and supporting devices.
8. Electrical identification.
9. Service entrance and details.
10. Overcurrent protection.
11. Switchboards
12. Grounding.
13. Transformers
14. Panelboards.
15. Motor control centers.
16. Lighting fixtures.
17. Fire Protective signaling systems.
18. Automatic fire detection systems.
19. Emergency/standby systems.

ACCESSIBILITY PLAN REVIEW REQUIREMENTS

In order to perform a thorough Accessibility Plan Review, the following specifications, drawings and details must be submitted:

Complete signed and sealed architectural plans and material specifications of all work. Details and plans drawn to scale with sufficient clarity, details and dimensions to show the nature and extent of the work proposed.

A site plan including the following information:

1. Size and location of all new construction and all existing structures on the site.
2. Location of any recreational facilities (ie: pool, tennis courts, etc.)
3. Established street grades and proposed finished grade.
4. Accessible parking, other locations of public access to the facility, accessible exterior routes and locations of accessible entrances.

Architectural plans and specifications to include:

1. Description of uses and the proposed use group(s) for all portions of the building. The design approach for mixed-uses (as applicable).
2. Fully dimensioned drawings to determine areas and building height.
3. Adequate details and dimensions to evaluate accessible means of egress, including occupant loads for each floor, exit arrangement and sizes, corridors, doors, stairs, areas of refuge, etc.
4. Adequate details and dimensions to evaluate the accessible route to areas required to be accessible, including corridors, doors, protruding objects, maneuvering clearances, clear floor space at fixtures and controls, etc.
5. Accessibility provisions including but not limited to access to services, seating, listening systems, accessible fixtures, elevators, work surfaces, etc.
6. Accessible plumbing facilities and details.
7. Tactile signage provided.
8. Details of required fire protection systems.

SPRINKLER SYSTEM PLAN REVIEW REQUIREMENTS

Note: *Installation, alteration or modification to any Sprinkler System shall require a separate submittal, review, approval and permit.*

In order to perform a thorough Sprinkler Plan Review, the following specifications, drawings and details must be submitted:

1. **Complete plans and specifications for the sprinkler system and related equipment.**
2. **Description and locations of uses within the building.**
3. **Design details in accordance with the appropriate reference standard (ie: NFPA 13, 13D, 13R) as referenced by the ICC International Building Code.**
4. **Design calculations indicating the discharge requirements of the system with evaluation of the arrangement and source of the water supply.**
5. **Results of a current flow test indicating the location and date of the test.**
6. **Working drawings indicating all pipe sizes and the spacing between branch lines and sprinklers on the branch line.**
7. **Material specifications and equipment specifications. All materials used should be verified that they are installed in accordance with their listing.**

FIRE LICENSING PROCEDURES

Please see the "Fire Prevention" section of our web site <http://www.cranberrytownship.org/1633/Fire-Prevention> for testing information regarding sprinkler systems, fire alarms systems, kitchen hood suppression systems and other miscellaneous items covered by the Fire Code. Any questions can be directed to the Fire Administrator at 724-776-4806, extension 1113.

ENERGY PLAN REVIEW REQUIREMENTS

In order to perform a thorough Energy Plan Review, the following specifications, drawings, and details must be submitted:

- 1. Complete signed and sealed architectural plans and material specifications of all work. Details and plans drawn to scale with sufficient clarity, details and dimensions to show the nature and extend of the work proposed.**
- 2. Three (3) sets of construction documents and other supporting data.**
- 3. Three (3) sets of exterior envelope component materials.**
- 4. U-factors of the envelope systems.**
- 5. U-factors of fenestration products.**
- 6. R-values of insulating materials.**
- 7. Size and type of apparatus and equipment.**
- 8. Equipment and systems controls.**
- 9. Other pertinent data as required to indicate compliance with the requirements of the Code.**
- 10. Com-Check information as provided from <www.energycodes.gov>**



Cranberry Township
2525 Rochester Road
Cranberry Twp., PA 16066

724.776.4806

Guide to Sewer and/or Water Connections:

Who should I Contact to determine if service is available?

Residential Connections: Joseph Leavens
(724) 776-4806, extension 1515
Joe.leavens@cranberrytownship.org

Commercial Connections: Tim Zinkham
(724) 776-4806, extension 1183
Tim.zinkham@cranberrytownship.org

- If residential service is not currently available, contact Tim Zinkham regarding the requirements for a main line extension.

If sanitary sewer and/or water service is available, what work is the Township responsible for?

The Township will:

- Determine the location of your tap and water meter (if applying for water service)
- Perform a water tap (2" in size and smaller – if applying for water service)
- Provide and install your water meter and remote (1" in size and smaller – if applying for water service) Note: Billing begins when the meter is installed.
- Provide and install your curb box on the service line (if applying for water service)
- Perform required inspections which may include
 - Outside waterline (water service only)
 - Outside sanitary sewer line (sewer service only)
 - Sewer and/or water final (water and/or sewer service)

If sanitary sewer and/or water service is available, what am I responsible for?

The property owner is responsible for:

- Submitting Service Application and appropriate Tap Fee(s)
- Contacting and hiring a contractor / plumber to install the sewer and/or water service
- Placing a Pennsylvania OneCall – dial 811
- All materials needed for the sewer and/or water service line including but not limited to: appropriate pipe, stone for backfill, sanitary sewer tap, water meter spread fittings, thermal expansion tank, water meter pit, grinder pump
- The sewer and/or water line from the main line into the structure
- Scheduling the necessary inspections and water tap
- **FOR INSPECTIONS AND WATER TAP CALL: 724-776-4806, EXTENSION 1161. YOU MUST CALL BY 3:00PM TO SCHEDULE AN INSPECTION FOR THE NEXT BUSINESS DAY. (Taps are performed on Wednesday, Thursday, and/or Friday)**
- Disconnecting the existing well (if applicable)
- Abandoning the existing on-lot septic system (if applicable)

REQUIRED NON-RESIDENTIAL INSPECTIONS

PRIOR BUSINESS DAY REQUEST (by 3:00 p.m.) IS REQUIRED BY CRANBERRY TOWNSHIP FOR THE SCHEDULING OF AN INSPECTION. Please call the inspection scheduling line at (724) 776-4806, extension 1161. The following are required inspections to be aware of:

- A. FOOTER:** prior to concrete pour when rebar is in place.
- B. OUTSIDE SEWER:** All sanitary plumbing from foundation to sewer lateral test tee. Visual & air test.
- C. FOUNDATION:** made after foundation is constructed and prior to backfilling. Poured concrete foundation shall be inspected with forms and reinforcing in place and prior to pour.
- D. INSIDE SEWER:** All sanitary plumbing from foundation to under slab. Visual & air test.
- E. WATER SERVICE LINE:** Water line from curb stop to meter angle valve. Visual.
- F. CONCRETE FLOORS:** prior to concrete pour.
- G. REINFORCED MASONRY - as block or poured concrete walls are prepared and after steel reinforcement is installed.**
- H. STEEL:** after erection and installation is complete.
- I. ELECTRICAL, SERVICE, ROUGH WIRING AND FINAL:** performed by the Township Inspection Agency.
 - SERVICE CONNECTION (* PROVIDE PENN POWER RELEASE #)
 - ROUGH WIRE
 - FINAL ELECTRICAL
- J. ROUGH FRAMING:** prior to closing in and concealment of framing and prior to insulation.
- K. GREASE TRAP:** Visual
- L. ENERGY CONSERVATION**
- M. PLUMBING AND MECHANICAL ROUGH-INS:** prior to concealment. (ABOVE GROUND)
- N. FIRE BLOCKING AND DRAFTSTOPPING:** when completed. Fire rated floor/wall/ceiling assemblies – structure shall be inspected prior to cover. All cover (GYP board, etc.) shall be inspected after fastening and prior to tape/finish. All fire rated assemblies shall be U.L. design or equal.
- O. FIRE LINE:** Visual and hydrostatic test of all pipe, valves and hydrants from tee or valve to double check backflow prevention device. Hydrostatic testing performed by contractor.
- P. FIRE PROTECTION AND FIRE DETECTION SYSTEMS:**
 - A. Hydrostatic
 - B. Visual
 - C. Water FlowAll Fire Protection/Detection/Suppression systems that are taken out of service must be reported to the 911 Center at 724-284-5211 as well as when the system is placed back in service.
- Q. FINAL SEWER & WATER:** Final site inspection of meter spread, remote meter, curb box, valve box, manhole, and fire hydrants.
- R. ACCESSIBILITY**
- S. FINAL:** walk-through inspection is made after construction is completed, final electrical inspection verified, and structure is made ready for occupancy.
- T. ZONING APPROVAL:** walk-through inspection is made after review is completed and any building inspections are completed and structure is made ready for occupancy.
- U. ADDITIONAL INSPECTIONS MAY BE REQUIRED AS CONSTRUCTION PROGRESSES.**

Also, please have copies of all third party inspections such as concrete cylinder testing, welding inspections, soils testing reports, and on site erection/installation inspection approvals sent to Cranberry Township.

Please note that the above listing is for reference and that all work performed must comply with all Township codes and approvals, and State and Federal requirements.



24 HOUR INSPECTION SCHEDULING LINE

(724) 776-4806, extension 1161

PRIOR BUSINESS DAY REQUEST (by 3:00 p.m.) IS REQUIRED FOR ALL INSPECTIONS.

(There will be no return-call confirmation on requests for inspections unless a time slot is filled for sewer and water inspections).

THE FOLLOWING INFORMATION WILL BE REQUIRED:

1. NAME _____
2. PHONE NUMBER WHERE YOU CAN BE REACHED DURING THE DAY - INCLUDING THE AREA CODE _____
3. PERMIT # _____
4. TYPE OF INSPECTION _____
5. DATE AND DAY OF THE WEEK INSPECTION IS REQUESTED _____

6. AM or PM must be requested on all inspections except for sewer and water inspections which must be requested for a specific time from the following: 8:00, 9:00, 10:00, 11:00, 12:30, 1:30, and 2:30)
*** APPROXIMATE TIME FOR CONCRETE POUR INSPECTIONS ONLY:**
7. LOT # _____ & PLAN _____
STREET ADDRESS _____