



**PLYMOUTH TOWNSHIP
RESIDENTIAL CODE PACKAGE AND
INSPECTION REQUIREMENTS**

www.plymouthtownship.org

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When is a permit required?

An ordinary repair does not require a permit. Permits may not be required, however all work must meet code requirements. Any questions please contact Plymouth Township.

The following are NOT ordinary repairs:

- (1) Cutting away a wall, partition or portion of a wall.**
- (2) The removal or cutting of any structural beam or load-bearing support.**
- (3) The removal or change of any required means of egress, or rearrangement of parts of a structure affecting the egress requirements.**
- (4) The addition to, alteration of, replacement or relocation of any standpipe, water supply, sewer, drainage, drain leader, gas, soil, waste, vent or similar piping, electric wiring or mechanical.**

(a) A permit is not required for the installation, alteration or repair of generation, transmission, distribution, metering or other related equipment that is, by established right, under the ownership and control of a public utility as the term "public utility" is defined in 66 Pa.C.S. § 102 (relating to the definitions).

The following is a list of residential work and is considered *ordinary repairs and that do NOT require a permit from Plymouth Township.

I. Building Construction:

- Exterior or interior painting, papering, tiling, carpeting, flooring, cabinets, counter tops and similar finishing work.
- Any agricultural building
- Utility and miscellaneous use structures that are accessory to detached one-family dwellings having a building area less than 1000 square feet. The term includes
 1. Carports*
 2. Detached private garages*
 3. Greenhouses *
 4. Sheds*

*** Note that a Zoning Permit is required prior to construction for the above accessory structures***

The term does not include swimming pools or spas except as excluded below

- Prefabricated swimming pools that are less than 24 inches deep.
- Swings and other playground equipment accessory to a one-or two-family dwelling.
- Window awnings supported by an exterior wall which do not project more than 54 inches from the exterior wall and do not require additional support.
- Replacement of glass in any window or door. The replacement glass shall comply with the minimum requirements of the "International Residential Code."
- Installation and replacement of a window, door, garage door, storm window and storm door in the same opening if the dimensions or framing of the original opening are not altered. The installation of means of egress and emergency escape windows may be made in the same opening, without altering the dimensions or framing of the original opening if the required height, width or net clear opening of the previous window or door assembly is not reduced.
- Replacement of existing roof material that does not exceed 25% of the total roof area performed within any 12-month period.
- Replacement of existing siding.
- Repair or replacement of any part of a porch or stoop which does not structurally support a roof located above the porch or stoop.
- Installation of additional roll or bat insulation.

- Replacement of exterior rainwater gutters and leaders.

II. Minor electrical work for the following:

- Replacement of lamps or the connection of approved portable electrical equipment to approved permanently installed receptacles
- Replacement of a receptacle, switch or lighting fixture rated at 20 amps or less and operating at less than 150 volts to ground with a like or similar item. This does not include replacement of receptacles in locations where ground-fault circuit interrupter protection is required.
- Replacement of installed electrically operated equipment such as doorbells, communication systems and any motor operated device.
- Installation, alteration or rearrangement of communications wiring.
- Replacement of dishwashers.
- Replacement of kitchen range hoods.
- Installation of battery-powered smoke detectors.

III. The following gas work:

- Portable heating, cooking or portable clothes drying appliances.
- Replacement of a minor part that does not alter approval of equipment or make this equipment unsafe.
- A portable fuel cell appliance that is not connected to a fixed piping system and is not interconnected to a power grid.

IV. The following mechanical work or equipment:

- A portable heating appliance.
- Portable ventilation appliances.
- A portable cooling unit.
- Steam, hot or chilled water piping within any heating or cooling equipment governed under the Uniform Construction Code.
- Replacement of any minor part that does not alter approval of equipment or make the equipment unsafe.
- Self-contained refrigeration systems containing 10 pounds or less of refrigerant or that are put into action by motors 1 horsepower or less.
- Portable evaporative cooler.
- A portable fuel cell appliance that is not connected to a fixed piping system and is not interconnected to a power grid.

V. The following plumbing work:

- Replacement of bib valves if the replacement hose bib valves are provided with an approved atmospheric vacuum breaker.
- Refinishing of existing fixtures.
- Replacement of ball cocks.
- Repair of leaks. (for above ground piping only)
- Clearance of stoppages.
- Replacement of faucets or working parts of faucets.
- Replacement of traps.
- Replacement of a water closet, lavatory or kitchen sink in an existing location
- Replacement of domestic clothes washers and dishwashers.

VI. The following heating, ventilation and air conditioning work:

- Replacement of motors, pumps and fans of the same capacity.

- Repair and replacement of heating, supply and return piping and radiation elements which do not require rearrangement of the piping system.
- Repair of duct work.
- Replacement of HVAC equipment or systems with the same make & model only.
- Repair and replacement of control devices for heating and air conditioning equipment.
- Replacement of kitchen range hoods.
- Replacement of clothes dryers if there is no change in fuel type, location or electrical requirements.
- Replacement of stoves and ovens if there is no change in fuel type, location or electrical characteristics.

Any work not listed above requires the appropriate permit from Plymouth Township.

CODE LIST FOR PLYMOUTH TOWNSHIP

The following are the current codes enforced by Plymouth Township:

- International Fire Code 2009
- International Residential Code 2009
- National Electric Code, 2008
- International Energy Conservation Code, 2009
- ICC/ANSI A117.1 2009
- NFPA 13D, 2007
- NFPA 72, 2007
- NFPA 101 2006
- SPRINKLERS ARE REQUIRED UNDER PLYMOUTH TOWNSHIP FIRE CODE
- Other codes as referenced by the above codes

Land development and zoning approvals must be obtained prior to plan submission.

NOTE: The contractor may submit drawings without an architect or engineer seal. However, if plans are found to be unsafe or structurally inadequate revised plans must be signed and sealed by an Architect and/or Engineer(s).

We will review and stamp each approved set of drawings.

One set will be returned at the time the permit is *picked up* Approved plans & permits must be available at all inspections.

***All submissions must be complete. A complete submission shall include Building, Electrical, Mechanical, Plumbing, Use and Occupancy and Water, sewer, and fire protection (if applicable) applications, Fees, Construction contracts and 2 sets of plans, and any other supporting documents. (Penn Dot Highway occupancy permits must be submitted where required.) Submissions missing any of these items will be rejected at the counter.**

Energy Code information must be submitted with Building Permit application per submission requirements.

****Information submitted via fax machine will not be accepted.**

Plan review for residential permits will be 15 working days from date of complete submission.

REQUIRED RESIDENTIAL CONSTRUCTION DOCUMENTS

All plans must be signed and sealed by the registered design professional responsible for this work

ZONING APPROVAL: Copies of all zoning variances must be supplied at time of permit s submission

SITE PLAN: Scaled drawing, which shows the size and location of all new construction and all existing structures on the site. Distances from structure(s) to lot lines and other structures on the property. Impervious and building coverage must be shown on plan.

SOILS REPORT: Results of soil investigation that determines the allowable soil bearing pressure to be used by the design professional in the foundation design. Soils report is required for all new buildings.

SPECIFICATIONS: Manufacturer installation instructions for all appliances and equipment to be installed.

ARCHITECTURAL: Dimensioned plans for each floor level that shows room layouts and use of space. Also includes elevation views; wall sections; schedules for window, flashing details, door and finishes; stair dimension and details, such as, riser height, tread width, guard/handrail height and headroom dimension.

P **STRUCTURAL:** Typical floor and roof framing plans. The plan(s) shall include details of connections, size of members, materials to be used, grade and species of all material, all the information required to erect the joists, beams, rafters, columns, or girders within the structure.

L **FOUNDATION:** Included on the dimensioned plan are the allowable soil bearing pressure, the depth of the foundation, and the proposed materials to construct the foundation.

A **FIRE PROTECTION:** When required, the construction documents may include a submission for the automatic fire suppression system, the fire alarm system, smoke control system, single/multiple station detectors

N **MECHANICAL:** Location, size and listed/labeled information for all equipment and appliances that comprise parts of the buildings mechanical system. Ventilation and exhaust calculations, schedules, supply and exhaust ductwork, chimney termination, materials, and any other information required to complete the buildings HVAC system.

S **PLUMBING:** Includes isometric riser diagrams for the potable water supply and the drain waste & vent systems with the location and materials specified for all the piping and fixtures within the plumbing system. Also details of special devices (backflow preventer, grease traps, etc.) shall be shown. Storm water drainage calculations and devices shall be included in the submission.

ELECTRICAL: Service entrance conductors, grounding, and overcurrent protection location, material methods and methods, disconnect location and type of all electrical devices, **load calculations** and the location of emergency lighting & exit signs

ENERGY: All plan submissions must include energy calculations based on the International Energy Code and using the Res-Check software Program. The Program is free and downloadable from <http://www.energycodes.gov/rescheck/download.stm>

NOTE: See the PLAN SUBMISSION STANDARDS section for additional requirements.

Required Information for Deck Plans

2 Sets of plans needed showing the following

- ◆ Site plan showing distance to rear and side property lines
- ◆ Manufacturer specifications for the pressure treated lumber*
- ◆ Manufacturer specifications for all hangers, nails screws and connectors*
- ◆ Dimensions and spacing of beams and joists
- ◆ Footing location and dimensions
- ◆ Stair detail, including rise and run
- ◆ Railing detail, including cross section details for handrails
- ◆ Guard height and details
- ◆ Details for attachment to house
- ◆ Details for connection of post and beam. **Notching of post is not acceptable without an engineer's seal for connection and bolts.**
- ◆ All connections must use approved hangers or connectors. **Toe nailing is no longer permitted under the 2006 IRC**

***Due to the corrosive nature of the new pressure treated lumber, all joist hangers, nails, bolts, anchors, connectors and screws must be a minimum of G185 Hot dipped galvanized or stainless steel. No Exceptions. ***

Submissions must have all of the above information plus a completed

Building Permit Application

Use and Occupancy Application

Signed Contract and Workman comp & Liability Insurance (if done by contractor)

Fees.

Residential Inspection Requirements
Plymouth Township Code Enforcement Department

Plymouth Township may require other inspections as deemed necessary in the field.

1. Advance notice of **48 hours** may be required for the Building Inspector for the purpose of scheduling inspections or re-inspection.
2. Additional inspections shall be charged at \$85.00 per hour with a 1 hour minimum charge
3. **Required inspections shall be as follows:**
 - A.** **A**ll concrete, including footings, walls and slabs, prior to placement of concrete. All reinforcing rods and wire mesh must be in place at time of inspection. **Concrete shall not be released until the inspection is completed and approved.**
 - B.** **F**oundations after damp proofing/waterproofing and drainage have been installed. **Foundation walls shall not be backfilled until the first floor deck is installed or the walls are braced internally.**

A first floor elevation certification is required to be submitted to Plymouth Township prior to scheduling a backfill inspection.

- C.** **E**LECTRICAL, SERVICE, ROUGH WIRING AND FINAL: performed by Township Inspector
- D.** **H**ard-wired smoke detector wiring must be installed at the time the rough electrical inspection is done
- E.** **W**all sheathing, prior to covering
- F.** **F**raming of all walls, floors and ceilings prior to concealment. Inspection is not to be scheduled until all electrical, mechanical, plumbing and sprinkler work is roughed in and inspected. Partial framing inspections will not be done.
- G.** **D**eck framing prior to installation of deck boards
- H.** **I**nsulation
- I.** **F**ire stopping and taping inspection for any required rated wall
- J.** **S**prinkler inspection.
- K.** **P**lumbing Inspection, rough and final
- L.** **F**inal Inspection/Use and Occupancy Inspection. This inspection must be completed prior to the occupancy of the building.

All outstanding fees must be paid prior to scheduling this inspection

- M.** **O**ther inspections as deemed necessary by the Building Inspector

4. **Special inspections may be required for the following items as determined by Building Inspector:**
 - a. **Soils**
 - b. **Concrete Construction, including footings and slab placement, mix and proper strength**
 - c. **Masonry**
 - d. **Steel**
 - e. **Welding**
 - f. **E.I.F.S. (if applicable)**

Above inspections shall be conducted by an approved inspection agency.

5. Deviations or changes to the approved plans must be submitted for approval prior to performing any work associated with the change
6. All work shall be conducted in a professional and workmanlike manner consistent with all
7. Plymouth Township Codes, approved drawings, as well as Pennsylvania and Federal Regulations.

Generally, hard-wired smoke detectors must be installed in a residence in compliance with Section 6-22 of the Plymouth Township Fire Code

Sec. 6-22. Installation requirements.

(a) Smoke detectors required. Smoke detectors shall be installed in each sleeping room, outside of each separate sleeping area in the immediate vicinity of the bedrooms and on each additional story of the dwelling, including basements and cellars, but not including crawl spaces and uninhabitable attics. In dwellings or dwelling units with split levels, a smoke detector need be installed only on the upper level, provided the lower level is less than one full story below the upper level, except that if there is a door between levels, then a detector is required on each level. All detectors shall be interconnected such that the actuation of one alarm will actuate all the alarms in the individual unit and shall provide an alarm which will be audible in all sleeping areas. All detectors shall be approved and listed and shall be installed in accordance with the manufacturer's instructions.

(b) Alterations, repairs and additions. When alterations, repairs or additions requiring a permit occur, or when one or more sleeping rooms are added or created in existing dwellings, the entire building shall be provided with smoke detectors located as required for new dwellings; the smoke detectors are not required to be interconnected unless other remodeling considerations require removal of appropriate wall and ceiling coverings to facilitate concealed interconnected wiring.

(c) Power source. Required smoke detectors shall receive their primary power from the building wiring when such wiring is served from a commercial source, and when primary power is interrupted, shall receive power from a battery. Wiring shall be permanent and without a disconnecting switch other than those required for over current protection. Smoke detectors may be battery operated when installed in buildings without commercial power.

All wiring must be installed at the time the rough framing inspection is completed

PERMIT FEES

RESIDENTIAL PLAN REVIEW AND INSPECTION FEES

*** A \$4.00 surcharge in accordance with the Uniform Construction Code is required for all permits ***

Fees for residential alterations, additions, installations, and repairs are based on contract price. **A copy of the signed contract MUST accompany ALL permit applications.** ** Or your request will be considered incomplete and turned away at the counter or upon clerk review.

Included but not limited to fences, pools, plumbing, demolition, HVAC, electrical, concrete pads, sidewalks, decks and some garages.

*All permit fees tally as follows- Plan review & inspection Figure + 20% administrative (x .20) + 4.00 State UCC fee = TOTAL PERMIT FEE - See Example below

Residential Construction Valuation	Plan review & inspection Fee
\$1.00 ~ \$1,000.00	\$55.00
\$1,001.00 ~ \$5,000.00	\$100.00
\$5,001.00 ~ \$10,000.00	\$220.00
\$10,001.00 ~ \$25,000.00	\$220.00 For the first \$10,000.00 Plus \$13.08 for each additional \$1,000.00 or fraction of \$1,000.
\$25,001.00 ~ \$50,000.00	\$416.20 For the first \$25,000.00 Plus \$10.10 for each additional \$1,000.00 or fraction of \$1,000.
\$50,001.00 ~ \$100,000.00	\$668.70 For the first \$50,000.00 Plus \$7.00 for each additional \$1,000.00 or fraction of \$1,000.
\$100,001.00 ~ \$500,000.00	\$1,018.70 For the first \$100,000.00 Plus \$5.60 for each additional \$1,000.00 or fraction of \$1,000.
\$501,000.00 ~ \$1,000,000.00	\$3,258.70 Fr the first \$500,000.00 Plus \$4.75 for each additional \$1,000.00 or fraction of \$1,000.
\$1,000,001.00 and up	\$5,633.70 Fr the first \$1,000,000.00 Plus \$4.15 for each additional \$1,000.00 or fraction of \$1,000.

Residential Use and Occupancy permit **\$50.00**

* If deemed necessary by the Code Official, Special Engineering reviews and inspections are an additional cost.

*Additional inspections over and above the initial and follow up inspection will be billed to the contractor at \$150.00 per inspection. Additional plan reviews caused by field revisions will be billed at the prevailing rate. All fees will be paid prior to final U & O Inspection.

EXAMPLE.....

Plan Review & Inspection Fee +		
Plus 20% Admin. (x.2)	+	
State fee UCC	+	\$4.00
TOTAL PERMIT FEE	=	

DEMOLITION OF STRUCTURES

Demolition of structures shall comply with Chapter 33 of the IBC and the following provisions

Extermination Letter

An extermination letter must accompany any application for demolition as well as a site plan showing the properties to be demolished. In addition the following requirements must be met prior to the permit being issued:

THE CONTRACTOR OR OWNER IS RESPONSIBLE TO COMPLY WITH THE DEP ASBESTOS REMOVAL PROGRAM. THE FORMS AND INSTRUCTIONS ARE LOCATED AT

http://www.dep.state.pa.us/dep/deputate/AIRWASTE/AQ/asbestos/docs/2700_fm_aq0021_inst.doc

SECTION 3303 DEMOLITION

3303.1 Construction documents.

Construction documents and a schedule for demolition must be submitted. No work shall be done until such construction documents or schedule, or both, are approved.

3303.2 Pedestrian protection.

The work of demolishing any building shall not be commenced until pedestrian protection is in place as required by this chapter.

3303.4 Vacant lot.

Where a structure has been demolished or removed, the vacant lot shall be filled and maintained to the existing grade or in accordance with the ordinances of the jurisdiction having authority.

3303.5 Water accumulation.

Provision shall be made to prevent the accumulation of water or damage to any foundations on the premises or the adjoining property.

3303.6 Utility connections.

Service utility connections shall be discontinued and capped in accordance with the approved rules and the requirements of the authority having jurisdiction.

3306.9 Adjacent to excavations.

Every demolition and/or excavation shall be enclosed with a barrier not less than 6 feet (1829 mm) high. Barriers shall be of adequate strength to resist wind pressure as specified in Chapter 16.

PROTECTION OF ADJOINING PROPERTY

3307.1 Protection required.

Adjoining public and private property shall be protected from damage during construction, remodeling and demolition work. Protection must be provided for footings, foundations, party walls, chimneys, skylights and roofs. Provisions shall be made to control water runoff and erosion during construction or demolition activities.

The person making or causing an excavation to be made shall provide written notice to the owners of adjoining buildings advising them that the excavation is to be made and that the adjoining buildings should be protected. Said notification shall be delivered not less than 10 days prior to the scheduled starting date of the excavation.



700 Belvoir Rd.
 Plymouth Meeting, PA 19462
 610-277-4100 (Ph.)
 610-277-4335 (FX.)
 www.plymouthtownship.org

<h1 style="margin: 0;">Plymouth Township Building Permit Application</h1>

Please type or print clearly

I. Location of Work		
Address:	Date:	
Type of work:	Building Class:	Type of Occupancy:
II. Applicant		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
III. Owner		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
IV. Architect/Engineer		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
V. Contractor		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
VI. Description of Work		
Cost of Construction:	Copy of contract is required upon submittal	Square footage:
Description:		

Applicant will be mailed the permit unless box is checked for pick up. []

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL		
By:	Date:	
VIII. PERMIT FEE & REVIEW		
<input type="checkbox"/> Insurance:	Inspection fee:	
<input type="checkbox"/> Cost of construction:	Review fee:	
<input type="checkbox"/> Contract:	Subtotal:	
<input type="checkbox"/> Plans:	Administrative fee:	
<input type="checkbox"/> Zoning approval: Date:	State fee:	\$4.00
		Other fee:
		Total fee:



700 Belvoir Rd.
 Plymouth Meeting, PA 19462
 610-277-4100 (Ph.)
 610-277-4335 (FX.)
 www.plymouthtownship.org

**Plymouth Township
 Electrical Permit
 Application**

Please type or print clearly

I. Location of Work		
Address:	Date:	
Type of work:	Building Class:	Type of Occupancy:
II. Applicant		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
III. Owner		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
IV. Architect/Engineer		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
V. Contractor		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
VI. Description of Work		
Cost of Construction:	Copy of contract is required upon submittal	Square footage:
Description:		

Applicant will be mailed the permit unless box is checked for pick up.

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL		
By:	Date:	
VIII. PERMIT FEE & REVIEW		
<input type="checkbox"/> Insurance:	Inspection fee:	
<input type="checkbox"/> Cost of construction:	Review fee:	
<input type="checkbox"/> Contract:	Subtotal:	
<input type="checkbox"/> Plans:	Administrative fee:	
<input type="checkbox"/> Zoning approval: Date:	State fee:	\$4.00
Other fee:		
Total fee:		

Single Family Dwelling Electrical Load Calculation Worksheet

ADDRESS _____

Square feet of living space _____ x 3 watts each = _____.

Small Appliance Circuits _____ x 1500 watts each = _____.

220V Dryer Circuits _____ x 5000 watts each = _____.

220V Range/Oven Circuits _____ x 8000 watts each = _____.

220V Oven Circuits _____ x 4000 watts each = _____.

220V Cook top Circuits _____ x 4500 watts each = _____.

220V Water Heater Circuits _____ x 3000 watts each = _____.

110V Laundry Circuits _____ x 1500 watts each = _____.

110V Dishwasher Circuits _____ x 1500 watts each = _____.

110V Garbage Disposal Circuits _____ x 750 watts each = _____.

110V Trash Compacter Circuits _____ x 1500 watts each = _____.

110V Forced Air Unit Circuits _____ x 690 watts each = _____.

Sub-Total Watts = _____.

First 10000 Watts @ 100% = _____.

Remaining @ 40% = _____.

_____ Tons of A/C X 1720 Watts per ton = _____.

TOTAL WATTS = _____

TOTAL WATTS / 240 VOLTS = _____ **TOTAL AMPS**

>>Use a _____ Amp Main Service



700 Belvoir Rd.
 Plymouth Meeting, PA 19462
 610-277-4100 (Ph.)
 610-277-4335 (FX.)
 www.plymouthtownship.org

**Plymouth Township
 Mechanical Permit
 Application**

Please type or print clearly

I. Location of Work		
Address:	Date:	
Type of work:	Building Class:	Type of Occupancy:
II. Applicant		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
III. Owner		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
IV. Architect/Engineer		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
V. Contractor		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
VI. Description of Work		
Cost of Construction:	Copy of contract is required upon submittal	Square footage:
Description:		

Applicant will be mailed the permit unless box is checked for pick up.

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL	
By:	Date:
VIII. PERMIT FEE & REVIEW	
<input type="checkbox"/> Insurance:	Inspection fee:
<input type="checkbox"/> Cost of construction:	Review fee:
<input type="checkbox"/> Contract:	Subtotal:
<input type="checkbox"/> Plans:	Administrative fee:
<input type="checkbox"/> Zoning approval: Date:	State fee: \$4.00
	Other fee:
	Total fee:



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 www.plymouthtownship.org

**Plymouth Township
 Interior Plumbing
 Permit Application**

Please type or print clearly

I. Location of Work		
Address:	Date:	
Type of work:	Building Class:	Type of Occupancy:
II. Applicant		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
III. Owner		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
IV. Architect/Engineer		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
V. Contractor		
Name	E-Mail	
Address	Phone #	
City, State, Zip	Fax #	
VI. Description of Work		
Cost of Construction:	Copy of contract is required upon submittal	Township Reg.#:
Description:		

Applicant will be mailed the permit unless box is checked for pick up. []

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL	
By:	Date:
VIII. PERMIT FEE & REVIEW	
<input type="checkbox"/> Insurance:	Inspection fee:
<input type="checkbox"/> Cost of construction:	Review fee:
<input type="checkbox"/> Contract:	Subtotal:
<input type="checkbox"/> Plans:	Administrative fee:
<input type="checkbox"/> Zoning approval: Date:	State fee: \$4.00
	Other fee:
	Total fee:



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Plymouth Township Water Permit Application

Please type or print clearly

I. Location of Work			
Address:		Date:	
Commercial <input type="checkbox"/>	Residential <input type="checkbox"/>	Domestic Water <input type="checkbox"/>	Fire Main <input type="checkbox"/>
			One Call #
II. Applicant			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
III. Owner			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
IV. Architect/Engineer			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
V. Contractor			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
VI. Description of Work			
Cost of Construction:		Copy of contract is required upon submittal	Township Reg.#:
Size of Material:	Type of Material:	Type of Connection:	Length of Run:
Description:			

Applicant will be mailed the permit unless box is checked for pick up.

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL	
By:	Date:
VIII. PERMIT FEE & REVIEW	
<input type="checkbox"/> Insurance:	Inspection fee:
<input type="checkbox"/> Cost of construction:	Review fee:
<input type="checkbox"/> Contract:	Subtotal:
<input type="checkbox"/> Plans:	Administrative fee:
<input type="checkbox"/> Zoning approval: Date:	State fee: \$4.00
Other fee:	
Total fee:	



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 Plymouth Meeting, PA 19462
 610-277-4100 (Ph.)
 610-277-4335 (FX.)
 www.plymouthtownship.org

**Plymouth Township
 Sewer Permit
 Application**

Please type or print clearly

I. Location of Work			
Address:		Date:	
Type of work:		Building Class:	Type of Occupancy:
II. Applicant			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
III. Owner			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
IV. Architect/Engineer			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
V. Contractor			
Name		E-Mail	
Address		Phone #	
City, State, Zip		Fax #	
VI. Description of Work			
Cost of Construction:		Copy of contract is required upon submittal	Township Reg.#::
Size of Material:	Type of Material:	Type of Connection:	Length of Run:
Description:			

Applicant will be mailed the permit unless box is checked for pick up. []

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL	
By:	Date:
VIII. PERMIT FEE & REVIEW	
<input type="checkbox"/> Insurance:	Inspection fee:
<input type="checkbox"/> Cost of construction:	Review fee:
<input type="checkbox"/> Contract:	Subtotal:
<input type="checkbox"/> Plans:	Administrative fee:
<input type="checkbox"/> Zoning approval: Date:	State fee: \$4.00
Other fee:	
Total fee:	

Sec. 18-30. Registration--Licensed by other municipalities.

(a) A master plumber holding a **license granted by the examining board** of any municipality in the metropolitan Philadelphia area (defined hereby as Bucks, Montgomery, Chester, Delaware and Philadelphia counties) who engages in or works at the business of plumbing, drainage and sewage or who desires to engage in or work at the business of plumbing, drainage and sewage in the township shall, without further examination, be registered in the office of the board of health of Plymouth Township as a registered master plumber upon payment, each calendar year, of a registration fee established from time to time by resolution of township council, and the board of health, by its properly constituted agent or officer, shall issue a certificate of such registration.

(b) A journeyman plumber holding a license granted by the examining board of any municipality in the metropolitan Philadelphia area (defined hereby as Bucks, Montgomery, Chester, Delaware and Philadelphia counties) who engages in or works at the business of plumbing, drainage and sewage or who desires to engage in or work at the business of plumbing, drainage and sewage in the township shall, without further examination, be registered in the office of the board of health of Plymouth Township as a registered journeyman plumber upon payment, each calendar year, of a registration fee established from time to time by resolution of township council, and the board of health, by its properly constituted agent or officer, shall issue a journeyman's certificate of such registration.
(Ord. No. 873, § 1, 4-12-1982; Ord. No. 1026, § 1, 2-19-1990; Ord. No. 1168, §§ 1, 2, 1-16-1995)

Sec. 18-31. Same--Suspension or revocation of certificate.

A certificate of registration granted under this chapter may be suspended or revoked by the township in the event that the plumber, or a representative thereof, shall violate any of the rules or regulations of this chapter, shall refuse or neglect to make necessary corrections to work not approved by the township within a reasonable time after notification so to do, or who shall permit the use of his name by a person for the purpose of obtaining a permit to do plumbing work. (Ord. No. 873, § 1, 4-12-1982)

Sec. 18-32. Same--Term; renewal.

At the expiration of each calendar year, plumbers' certificates shall be null and void. A licensed master plumber desiring to continue in or to work at the business of plumbing, building drainage or sewer drainage for the ensuing year shall, between the first and thirty-first days of December of each and every year, surrender the certificate to the plumbing inspector and reregister his/their name and address upon such form as may be furnished by the board of health. (Ord. No. 873, § 1, 4-12-1982)

Sec. 18-33. Plumbers not to allow name to be used.

No person carrying on the business of plumbing, building drainage or sewer drainage shall allow his/their name to be used by any other person, either directly or indirectly, to obtain a permit or permits to do any work under the registered plumber's license. (Ord. No. 873, § 1, 4-12-1982)

Sec. 18-34. Required actions upon change in or cessation of business.

Every registered plumber shall give immediate notice of a change in his/their place of business and upon retirement from business shall surrender his/their certificate of registry to the plumbing inspector. (Ord. No. 873, § 1, 4-12-1982)



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<h2 style="margin: 0;">Plymouth Township Master Plumber Registration</h2>

Please type or print clearly

	Date:

I. Applicant

Name	E-Mail
Address	Phone #
City, State, Zip	Fax#

II. Company Name

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

Applicant must supply proof of liability workman comp. insurance along with proof of examining board certification.

The applicant is certifying that the above information is correct to the best of his knowledge.

Applicant Signature: _____ Date: ____/____/____
 -----Do not write below this line-----

III. APPROVAL

By:	Date:
-----	-------

IV. Information

Insurance []	Date approved:
Proof of examining board []	Reg. #



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<h2 style="margin: 0;">Plymouth Township Journeyman Plumber Registration</h2>

Please type or print clearly

	Date:

I. Applicant	
---------------------	--

Name	E-Mail
Address	Phone #
City, State, Zip	Fax#

II. Company Name	
-------------------------	--

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

Applicant must supply proof of liability workman comp. insurance along with proof of examining board certification.

The applicant is certifying that the above information is correct to the best of his knowledge.

Applicant Signature: _____ Date: ____/____/____
 -----Do not write below this line-----

III. APPROVAL	
----------------------	--

By:	Date:
-----	-------

IV. Information	
------------------------	--

Insurance []	Date approved:
Proof of examining board []	Reg. #



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**Plymouth Township
 Fire Protection Permit
 Application**

Please type or print clearly

I. Location of Work

Address:	Date:	
Type of work:	Building Class:	Type of Occupancy:

II. Applicant

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

III. Owner

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

IV. Design Professional

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #
NICET level and/or PE#:	

V. Contractor

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

VI. Description of Work

Cost of Construction:	Copy of contract is required upon submittal	Township Reg. #.
<input type="checkbox"/> Alarm	<input type="checkbox"/> Sprinkler:	<input type="checkbox"/> Suppression System:
Description:		

Applicant will be mailed the permit unless box is checked for pick up.

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

VII. APPROVAL

By:	Date:
-----	-------

VIII. PERMIT FEE & REVIEW

<input type="checkbox"/> Insurance:	Inspection fee:
<input type="checkbox"/> Cost of construction:	Review fee:
<input type="checkbox"/> Contract:	Subtotal:
<input type="checkbox"/> Plans:	Administrative fee:
<input type="checkbox"/> Zoning approval: Date:	State fee: \$4.00
	Other fee:
	Total fee:



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Plymouth Township Fire Protection Contractor Registration

Please Type or print clearly

<input type="checkbox"/> Alarm <input type="checkbox"/> Sprinkler <input type="checkbox"/> Extinguishing systems	Date:
------------------------------------------------------------------------------------------------------------------	-------

I.. Applicant

Name	E-Mail
Address	Phone #
City, State, Zip	Fax #

II. Company Name

Name	E-Mail
Address	Phone #
City, State, Zip	Fax#

III. Design Professional

Name	E-Mail
Address	Phone #
City, State, Zip	Fax#
NICET and Level or PE #:	

IV. Installer Name

Name	E-Mail
Address	Phone #
City, State, Zip	Fax#
NICET # or other proof of proficiency:	

The applicant is certifying that the above information is correct to the best of his knowledge.

Applicant Signature: _____ Date: ____/____/____
 -----Do not write below this line-----

V. APPROVAL

By:	Date:
-----	-------

VI. Information

Insurance []	Date approved:
Proof of examining board []	Reg. #

**INFORMATION REQUIRED FOR FIRE PROTECTION
SUBMITTAL TO BE REVIEWED BY PLYMOUTH TOWNSHIP
→ CHECKLIST MUST ACCOMPANY ALL SUBMITTALS- NO EXCEPTIONS**

**Two copies of signed and sealed plans (Fire protection engineer or NICET III/IV)
Cut sheets and calculations must be submitted along with this checklist.**

Sprinkler System Submittals: *See NFPA 13 for a complete submittal list

Location Address

- Plans must be to scale and clearly show work to be done including a **detailed scope of work.**
- Plan must show the job name and complete address.
- The specific type and quantity of sprinklers must be provided on every page.
- Two sets** of catalog cut sheets for all equipment including sprinklers, valves, etc. must be included and highlighted.
- Fire hydrant flow test information must be dated and **within 6 months.**
- Two sets** of hydraulic calculations must clearly show the friction loss for the backflow preventer and include a graph curve sheet.
- All hydraulic node points must be clearly **shown on the drawings.**
- All ceiling information including soffits, heights, construction type, slope, etc. must be shown and noted with cross section detailed on the plans.
- Specific code sections and storage information must be provided for all design densities over an Ordinary Group II.
- All plans must have the contractors name, address, and phone number.
- Provide a scaled site plan clearly showing the building fire department connection and fire hydrant locations.

Fire Alarm System Submittals: *See NFPA 72 for a complete submittal list

Location Address

- Plans must be to scale and include a **scope of work** outlining details of the project.
- Plans must show job name and complete address.
- The square foot area of the building must be noted on the plans.
- A summary sheet or symbol list showing a device count shall be provided.
- Two sets** of catalog cut sheets must be provided and **highlighted** for all components to be installed.
- Specific details must be provided regarding the offsite monitoring of the system including type of transmission means and name and location of receiving station.
- All wiring information must be shown on the plans including size, type, and all point to point wire runs.
- Two sets** of complete battery back up calculations must be provided that clearly note **battery size to be provided.**
- Two sets** of voltage drop calculations using the "RMS" or "UL MAX" values for notification devices must be provided.
- All plans must have the contractors name, address, and phone number.

Residential Plan Submission Checklist

The following sheet is to be completed by **general contractor or person coordinating submission** and included with all applications for permit.

Other requirements as determined by the Code Official may be required or requested based on scope of project.

- 1. **Two** sets of plans including _____
 - a. Site Plan _____
 - b. Foundation Details _____
 - c. Framing Plans including grade and species of lumber _____
 - d. Connection details including model numbers _____
 - e. Electrical Plans & Load Calculations _____
 - f. HVAC Plans Details with calculations _____
 - g. Manufacturers Insulation & Plumbing Plans _____
 - h. Zoning approval (if applicable) _____
- 2. Completed Building Permit Application _____
- 3. Completed Electrical Permit Application _____
- 4. Completed HVAC Permit Application _____
- 5. Completed Use and Occupancy Application _____
- 6. Completed Plumbing permit application and registration App. If needed. _____
- 7. Plumbing Plans _____
- 8. Plumbing connection permit _____
- 9. Completed Fire Protection permit applications, checklist and registration if needed _____
- 10. Two Signed and sealed fire protection drawings _____
- 11. All Fees with **SIGNED** contract _____
- 12. Res-Check Energy Calculations _____
- 13. Insurance Certificate for GC. And/or Subs.(If not on file previously) _____

Person coordinating submission:(Please Print) _____

Phone Number: _____ Fax Number: _____

E-mail : _____



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Plymouth Township Use & Occupancy Application

Please type or print clearly

I. U & O Location		
Address:	Suite:	Date

II. Applicant	
Name:	E-Mail:
Address:	Phone #:
City, State, Zip:	Fax #:

III. Owner	
Name:	E-Mail:
Address:	Phone #:
City, State, Zip:	Fax#:

IV. General Info	
Use change from:	Use change to:
Name Change from:	Name change to:
Total Square feet:	

- Residential: (Single Family Dwelling)** \$50.00 **Commercial:**
- 1-2,000 Sf = \$100.00
 - 2,001- 5,000sf = \$150.00
 - 5,001- 10,000sf = \$200.00
 - 10,001 – 100,000 = \$250.00
 - 100,001 – and above = \$500.00

Applicant will be mailed the Certificate unless box is checked for pick up.

Name _____ Ph. # _____

The applicant is certifying that he/she is the property owner or is acting as an agent for the owner of the property.

Applicant Signature: _____ Date: ____/____/____

-----Do not write below this line-----

V. APPROVAL	
By:	Date:
VI. PERMIT FEE & REVIEW	
Building code: IBC <input type="checkbox"/> IRC <input type="checkbox"/> Year _____	Construction Type:
Use Group/Occupancy Type:	Occupant Load Limit:
Hazard Class:	Sprinkler System: Yes <input type="checkbox"/> No <input type="checkbox"/>