



Borough of Crafton
NEW BUSINESS REQUIREMENT CHECKLIST
For Businesses and/or Landlords

FOLLOW THESE TIPS IF YOU PLAN TO OPEN A BUSINESS/CONDUCT BUSINESS IN CRAFTON:

- Make sure your intended business is permitted in the zoning district in which it is located.
- All businesses, landlords, or individuals intending to conduct business within the Borough of Crafton **MUST** be registered as a business with the Administrative Office, 2nd Floor of the Borough Building. The registration fee is \$10.00 and must be renewed yearly. Forms will be sent out by Jordan Tax Service, Inc. *
- Businesses: Complete the **Zoning Use and/or Zoning Occupancy Permit** application and return with the proper fees. An Occupancy inspection **MUST** be completed to insure compliance with the building, zoning, and fire safety codes. This permit must be completed prior to the opening of any business or occupying any space. *
- Property Owners/Landlords: Required, by ORDINANCE of the Borough of Crafton, to 1) obtain a **Rental Operation License** and submit the **Landlord Occupancy Report** for EVERY change in tenant occupancy. Additionally, Owners/Landlords **MUST REPORT ALL OCCUPANTS** living/occupying all commercial/residential properties, as well as all, the occupant's employment information, **ANNUALLY** on or before June 1st of EACH year. *
- Annual Fire Inspections are required on all Commercial Use properties. *
- File emergency/contact information with the Police Secretary at 412.921.2016.
- Remodeling? Check with the Building Inspector to see if a building permit is required. Electrical and plumbing inspections may also be required.
- ALL SIGNS require a permit. Submit a Sign Application together with drawings to scale, showing the size of the sign, type of lighting and location of the sign.
- All commercial businesses and residential properties with 9 or more units, **MUST** provide for their own garbage and recycling removal by private contract.
- Business Owners/Landlords are responsible for maintaining sidewalks and **MUST** keep them free of debris and ice/snow.

*Forms Attached

Building Inspector/Zoning Officer/Fire Marshall:
DJ Glancy
412.921.0752 x 18
Code Enforcement Officer
412.921.0752 x 26

Borough Administrative Office:
412.921.0752 x 10
Police Department Secretary – Non-Emergency
412.921.2016

BOROUGH OF CRAFTON

OCCUPANCY PERMIT APPLICATION

SECTION I. • APPLICATION TYPE

- SALE (\$35.00+) RENTAL OWNER OCCUPIED
 RESIDENTIAL (\$60.00 per unit) COMMERCIAL (\$75.00) CONDITIONAL

SECTION II. • PROPERTY USE & INFORMATION

PROPERTY ADDRESS: _____ LOT/BLOCK _____ - _____
PROPERTY TYPE: RESIDENTIAL COMMERCIAL MIXED USE
NUMBER OF UNITS: RESIDENTIAL DWELLINGS: _____ COMMERCIAL UNITS: _____
INTENDED USE OF PROPERTY: _____

SECTION III. • OWNER INFORMATION

OWNER'S NAME: _____
OWNER'S ADDRESS: _____
PHONE: _____ EMAIL: _____
OWNER'S AGENT or PROPERTY MANAGEMENT COMPANY: _____
CONTACT NAME: _____
PHONE: _____ EMAIL: _____

SECTION IV. • BUYER/TENANT INFORMATION

BUYER/TENANT NAME: _____
BUYER/TENANT ADDRESS: _____
PHONE: _____ EMAIL: _____
BUYER'S AGENT: _____
PHONE: _____ EMAIL: _____

SECTION V. • CERTIFICATE OF OCCUPANCY TO BE SENT TO

COMPANY: _____ CLOSING DATE: _____
ADDRESS: _____
PHONE: _____ FAX: _____
EMAIL: _____

APPLICANT MUST REVIEW AND SIGN THE REVERSE SIDE OF THIS APPLICATION

OFFICE USE ONLY

INITIAL INSPECTION DATE: _____ APPLICATION FEE PAID: YES NO
FOLLOW-UP INSPECTION DATE: _____ ADDITIONAL FEES PAID: YES NO
ADDITIONAL INSPECTION DATE: _____ PERMIT ISSUED ON: _____
ADDITIONAL INSPECTION FEES: _____ PERMIT NUMBER: _____
TENANT REGISTRATION FORM COMPLETED AND SUBMITTED WITH APPLICATION? : YES NO
COMMENTS: _____
ZONING DISTRICT: _____

BOROUGH OF CRAFTON

IMPORTANT INFORMATION • PLEASE READ!

OCCUPANCY PERMITS REQUIRED

BOROUGH ORDINANCE § 225-145 REQUIRES THAT ALL DWELLING UNITS AND COMMERCIAL PREMISES OBTAIN AN OCCUPANCY PERMIT PRIOR TO BEING OCCUPIED. A SEPARATE PERMIT MUST BE OBTAINED FOR EACH DWELLING UNIT AND COMMERCIAL PREMISES.

THE PURPOSE OF THIS ORDINANCE IS TO PROTECT THE HEALTH, SAFETY, AND WELFARE OF RESIDENTS, IN PARTICULAR, TO GUARANTEE THAT DWELLING UNITS ARE IN A SAFE, LIVABLE AND HABITABLE CONDITION. THIS IS ACCOMPLISHED BY ENSURING THAT THESE UNITS AND THEIR STRUCTURES ARE IN COMPLIANCE WITH CURRENT BUILDING, PROPERTY MAINTENANCE, AND LIFE-SAFETY CODES.

ANY CHANGE IN OCCUPANCY OF ANY DWELLING UNIT OR COMMERCIAL PREMISES SHALL BE REPORTED BY THE PROPERTY OWNER TO THE BOROUGH WITHIN TEN (10) DAYS AFTER SUCH CHANGE.

FAILURE TO COMPLY WITH THIS ORDINANCE MAY RESULT IN PROSECUTION WITH PENALTIES UP TO \$500.00 PLUS FILING COSTS.

CONDITIONAL OCCUPANCY PERMITS

CONDITIONAL OCCUPANCY PERMITS ARE ISSUED FOR PROPERTY SALES ONLY. THESE PERMITS DO NOT PERMIT THE DWELLING OR COMMERCIAL PROPERTY TO BE OCCUPIED. WHEN A CONDITIONAL PERMIT IS ISSUED, THE NEW OWNER MUST CONTACT THE BOROUGH TO SCHEDULE AND INSPECTION PRIOR TO ALLOWING ANY PERSON OR PERSONS TO OCCUPY THE STRUCTURE.

OCCUPANCY PERMIT PROCESS

IN ORDER TO OBTAIN AN OCCUPANCY PERMIT, A COMPLETED APPLICATION ALONG WITH THE APPROPRIATE FEE MUST BE SUBMITTED TO THE BOROUGH. **A TENANT REGISTRATION FORM MUST BE COMPLETED AND ACCOMPANY THIS APPLICATION FOR ALL RENTAL UNITS.**

UPON RECEIPT OF THE APPLICATION, AN INSPECTOR WILL CONTACT THE APPLICANT TO SCHEDULE AN INITIAL INSPECTION OF THE PROPERTY. AFTER THIS INSPECTION IS COMPLETED, A LIST OF CODE DEFICIENCIES, IF ANY, WILL BE FORWARDED TO THE APPLICANT. IT WILL BE THE APPLICANT'S (OR OWNER'S) RESPONSIBILITY TO CORRECT ANY OF THE NON-COMPLIANT DEFICIENCIES NOTED IN THE INSPECTION REPORT. UPON CORRECTION OF THE DEFICIENCIES, THE APPLICANT MUST NOTIFY THE INSPECTOR TO ARRANGE A RE-INSPECTION TO ENSURE THE DEFICIENCIES HAVE BEEN CORRECTED. ONCE THIS IS VERIFIED, THE CERTIFICATE WILL BE ISSUED.

THE INITIAL APPLICATION FEE INCLUDES TWO (2) INSPECTION VISITS: ONE (1) FOR THE INITIAL INSPECTION AND ONE (1) FOR THE FOLLOW-UP INSPECTION. IF THE FOLLOW-UP INSPECTION REVEALS THAT ITEMS ON THE INITIAL INSPECTION REPORT WERE NOT CORRECTED AND THE INSPECTOR NEEDS TO MAKE A THIRD OR SUBSEQUENT INSPECTION, EACH ADDITIONAL INSPECTION SHALL RESULT IN AN ADDITIONAL FEE. NO OCCUPANCY PERMIT WILL BE ISSUED UNTIL ALL APPLICABLE AND OUTSTANDING FEES ARE PAID IN FULL. **RE-INSPECTION FEES ARE AS FOLLOWS: RESIDENTIAL: \$35.00, COMMERCIAL: \$75.00**

APPLICANT ACKNOWLEDGEMENT AND CERTIFICATION

BY SIGNING BELOW, I ACKNOWLEDGE AND CERTIFY THE FOLLOWING:

- THAT I HAVE READ THE AFOREMENTIONED INFORMATION AND HEREBY ACKNOWLEDGE THAT I MUST NOTIFY THE BOROUGH OF CRAFTON OF ANY CHANGE IN OCCUPANCY TO THE PROPERTY INDICATED IN THE APPLICATION.
- I AM THE OWNER OR LAWFUL AUTHORIZED AGENT OF THE OWNER AND HERE BY GRANT PERMISSION TO ANY AUTHORIZED REPRESENTATIVE OF THE BOROUGH OF CRAFTON TO ENTER UPON SAID PROPERTY FOR THE PURPOSE OF INSPECTIONS AND ENFORCEMENT OF THIS ORDINANCE.
- THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT OR AGENT: _____

PRINT NAME: _____ DATE: _____

PROPERTY ADDRESS: _____



BOROUGH OF CRAFTON
NEW BUSINESS REGISTRATION FORM

*any business conducted or located within the borough.

Date: ____/____/____

Business Name: _____

Property Address: _____ Parcel ID: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ - _____ - _____ Phone 2: _____ - _____ - _____

Email Address: _____

Type of Business: Retail Services Other: _____

Tax ID: _____ Date Business Established: ____/____/____

Business Owner Name: _____

Owner Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ - _____ - _____ Phone 2: _____ - _____ - _____

Email Address: _____

Emergency Contact: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone 1: _____ - _____ - _____ Phone 2: _____ - _____ - _____

CRAFTON BUSINESS TAXES

_____ Business Privilege Tax: Based on prior year gross receipts, billed yearly, and Due on May 15th.

_____ Mercantile Tax: Based on quarterly gross receipts, billed quarterly.

_____ Local Service Tax: \$52.00 due from each person employed earning more than \$12,000 a year, or \$10.00 for those earning less including the owner.

_____ Earned Income Tax: To be withheld for ALL employees and remitted to Jordan Tax Service, Inc.
(check all that apply)

BUSINESS LICENSE FEE: \$10.00

CHECK # _____

OR CASH

RECEIVED BY: _____

TITLE: _____

DATE: ____/____/____

BOROUGH OF CRAFTON

ANNUAL FIRE INSPECTION APPLICATION

SECTION II. • PROPERTY USE & INFORMATION

PROPERTY ADDRESS: _____ LOT/BLOCK _____ - _____

BUSINESS NAME: _____

PROPERTY TYPE: ASSEMBLY BUSINESS EDUCATIONAL FACTORY
 HIGH-HAZARD INSTITUTIONAL MERCANTILE MIXED USE
 RESIDENTIAL (3 UNITS OR MORE) STORAGE UTILITY

SECTION III. • OWNER INFORMATION

OWNER'S NAME: _____

OWNER'S ADDRESS: _____

PHONE: _____ EMAIL: _____

PROPERTY MANAGEMENT COMPANY: _____

CONTACT NAME: _____

PHONE: _____ EMAIL: _____

EMERGENCY CONTACT: _____

PHONE: (DAY) _____ (NIGHT) _____

EMAIL: _____

APPLICANT MUST REVIEW AND SIGN THE REVERSE SIDE OF THIS APPLICATION

OFFICE USE ONLY

INITIAL INSPECTION DATE: _____ APPLICATION FEE PAID: YES NO

FOLLOW-UP INSPECTION DATE: _____ ADDITIONAL FEES PAID: YES NO

ADDITIONAL INSPECTION DATE: _____

ADDITIONAL INSPECTION FEES: _____

COMMENTS: _____

BOROUGH OF CRAFTON

IMPORTANT INFORMATION—PLEASE READ

FIRE INSPECTION REQUIRED

BOROUGH ORDINANCE § 1673 REQUIRES THAT CERTAIN MULTI-FAMILY DWELLING UNITS AND COMMERCIAL PREMISES PERFORM FIRE INSPECTION ANNUALLY. A SEPARATE INSPECTION WILL BE PERFORM FOR EACH COMMERCIAL PREMISES.

THE PURPOSE OF THIS ORDINANCE IS TO PROTECT THE HEALTH, SAFETY, AND WELFARE OF RESIDENTS, IN PARTICULAR, TO GUARANTEE THAT DWELLING UNITS ARE IN A SAFE, LIVABLE AND HABITABLE CONDITION. THIS IS ACCOMPLISHED BY ENSURING THAT THESE UNITS AND THEIR STRUCTURES ARE IN COMPLIANCE WITH CURRENT BUILDING, PROPERTY MAINTENANCE, AND LIFE-SAFETY CODES.

FAILURE TO COMPLY WITH THIS ORDINANCE MAY RESULT IN PROSECUTION WITH PENALTIES UP TO \$500.00 PLUS FILING COSTS.

FIRE INSPECTION PROCESS

IN ORDER TO OBTAIN AN FIRE INSPECTION, A COMPLETED APPLICATION ALONG WITH THE APPROPRIATE FEE MUST BE SUBMITTED TO THE BOROUGH.

UPON RECEIPT OF THE APPLICATION, AN INSPECTOR WILL CONTACT THE APPLICANT TO SCHEDULE AN INITIAL INSPECTION OF THE PROPERTY. AFTER THIS INSPECTION IS COMPLETED, A LIST OF CODE DEFICIENCIES, IF ANY, WILL BE FORWARDED TO THE APPLICANT. IT WILL BE THE APPLICANT'S (OR OWNER'S) RESPONSIBILITY TO CORRECT ANY OF THE NON-COMPLIANT DEFICIENCIES NOTED IN THE INSPECTION REPORT. UPON CORRECTION OF THE DEFICIENCIES, THE APPLICANT MUST NOTIFY THE INSPECTOR TO ARRANGE A RE-INSPECTION TO ENSURE THE DEFICIENCIES HAVE BEEN CORRECTED ONCE THIS IS VERIFIED.

THE INITIAL APPLICATION FEE INCLUDES TWO (2) INSPECTION VISITS: ONE (1) FOR THE INITIAL INSPECTION AND ONE (1) FOR THE FOLLOW-UP INSPECTION. IF THE FOLLOW-UP INSPECTION REVEALS THAT ITEMS ON THE INITIAL INSPECTION REPORT WERE NOT CORRECTED AND THE INSPECTOR NEEDS TO MAKE A THIRD OR SUBSEQUENT INSPECTION, EACH ADDITIONAL INSPECTION SHALL RESULT IN AN ADDITIONAL FEE.

APPLICANT ACKNOWLEDGEMENT AND CERTIFICATION

BY SIGNING BELOW, I ACKNOWLEDGE AND CERTIFY THE FOLLOWING:

- THAT I HAVE READ THE AFOREMENTIONED INFORMATION AND HEREBY ACKNOWLEDGE THAT I MUST NOTIFY THE BOROUGH OF CRAFTON OF ANY CHANGE IN OCCUPANCY TO THE PROPERTY INDICATED IN THE APPLICATION.
- I AM THE OWNER OR LAWFUL AUTHORIZED AGENT OF THE OWNER AND HERE BY GRANT PERMISSION TO ANY AUTHORIZED REPRESENTATIVE OF THE BOROUGH OF CRAFTON TO ENTER UPON SAID PROPERTY FOR THE PURPOSE OF INSPECTIONS AND ENFORCEMENT OF THIS ORDINANCE.
- THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT OR AGENT: _____

PRINT NAME: _____ DATE: _____

PROPERTY ADDRESS: _____

BOROUGH OF CRAFTON

Zoning Compliance Permit Application

SECTION I. • SITE LOCATION INFORMATION

SITE ADDRESS: _____ LOT & BLOCK: _____

PRIMARY BUILDING TYPE RESIDENTIAL COMMERCIAL

SECTION II. • PROJECT DESCRIPTION

RESIDENTIAL ACCESSORY USE STRUCTURE FENCE RETAINING WALL
(Garage, Shed, etc. under 1000 square feet) (Under 6 feet in height) (Under 4 feet in height)

SIGN INSTALLATION OR REPLACEMENT

SIGN SIZE: _____ x _____ = _____ Sq. Ft BUILDING FRONTAGE (linear feet): _____

OTHER: _____

ESTIMATED START DATE: _____ ESTIMATED COMPLETION DATE: _____

SECTION III. • APPLICANT/OWNER INFORMATION

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

E-MAIL _____

PROPERTY OWNER: SAME AS APPLICANT

OWNER NAME: _____

OWNER ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

E-MAIL _____

SECTION IV. • CONTRACTOR INFORMATION

CONTRACTOR NAME: _____

CONTRACTOR ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

CONTACT NAME: _____ PA REGISTRATION NO. _____

E-MAIL _____

SECTION V. • LOT DIMENSIONS AND COVERAGE INFORMATION

(APPLICABLE TO ACCESSORY STRUCTURE APPLICATIONS ONLY)

LOT DIMENSIONS: _____ x _____ = _____ Sq. Ft.

EXISTING BUILDING : _____ x _____ = _____ Sq. Ft.

PROPOSED AREA: _____ x _____ = _____ Sq. Ft.

(COVERAGE AS PERCENTAGE OF LOT)

EXISTING STRUCTURE: _____

PROPOSED ADDITION: _____

TOTAL LOT COVERAGE: _____

APPLICANT MUST REVIEW AND SIGN THE REVERSE SIDE OF THIS APPLICATION

QUESTIONS REGARDING THIS APPLICATION CAN BE DIRECTED TO THE BUILDING INSPECTION OFFICE AT (412) 921-0752 x 18.

100 STOTZ AVENUE • PITTSBURGH, PA 15205 • PHONE (412) 921-0752 • FAX (412) 921-0752 • WWW.CRAFTONBOROUGH.COM

Updated 10/2021

ADDRESS:

DATE APPROVED:

PERMIT NO.

PLAN NUMBER

BOROUGH OF CRAFTON

Zoning Compliance Permit Application

SITE ADDRESS: _____ LOT & BLOCK: _____

DETAILS OF WORK TO BE PERFORMED:

PERMIT FEES: SHED, FENCES, & RETAINING WALLS (ETC.)	\$35.00 (zoning only)
SIGN PERMIT	\$25.00 plus \$2.00 per square foot per sign face).
TEMPORARY OR A FRAME SIGNS	\$25.00 per year.

IMPORTANT INFORMATION • PLEASE READ!

APPLICANT ACKNOWLEDGEMENT AND CERTIFICATION

By signing below, I certify that I am the property owner or authorized agent thereof and all information contained herein and/or furnished by me along with this application is true and correct to the best to my knowledge. Furthermore, I acknowledge:

- This project will be constructed in accordance with the approved drawings and/or specifications and in compliance with the Borough of Crafton Zoning Ordinance and other applicable codes and ordinances.
- Any changes to the project from the submitted plans or documents must be approved by the Zoning Official.
- The owner or applicant agrees to provide any additional information as may be required by the Zoning Official.
- The Borough of Crafton and its authorized representatives shall have the authority to enter areas covered by such permit at any reasonable hour to inspect and enforce applicable provisions of the codes and ordinances.
- Applicant shall provide and attach hereto a copy of the construction contract with the licensed contractor.
- Contractor shall provide proof of current general liability insurance.
- Applicant shall provide and attach here to a signed copy of the Workers' Compensation Addendum.

SIGNATURE OF APPLICANT OR AGENT: _____

PRINT NAME: _____ DATE: _____

***** OFFICE USE ONLY *****

DATE RECEIVED: _____	ZONING PERMIT FEE: _____
ZONING PERMIT: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	ZONING DISTRICT: _____
DATE ISSUED: _____	ZONING COMPLIANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO
INSPECTOR: _____	CONDITIONAL USE REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO
PERMIT NUMBER: _____	ZONING VARIANCE REQUIRED? <input type="checkbox"/> YES <input type="checkbox"/> NO
REASON(S) FOR DENIAL: _____	

BOROUGH OF CRAFTON

WORKERS' COMPENSATION ADDENDUM

(REQUIRED TO BE ATTACHED TO ALL BUILDING PERMIT APPLICATIONS)

SITE ADDRESS: _____ LOT & BLOCK: _____

PART I

The Applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):

- Certificate of Insurance OR Certificate of Self-Insurance (must be attached).
- Affidavit of Exemption

PART II

Basis and Affidavit of Exemption

- Applicant is an Individual who owns the property.
- Contractor/Applicant is a sole proprietorship without employees.
- Contractor/Applicant is a corporation, and the only employee working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.
- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act.
- Other: Please Explain: _____

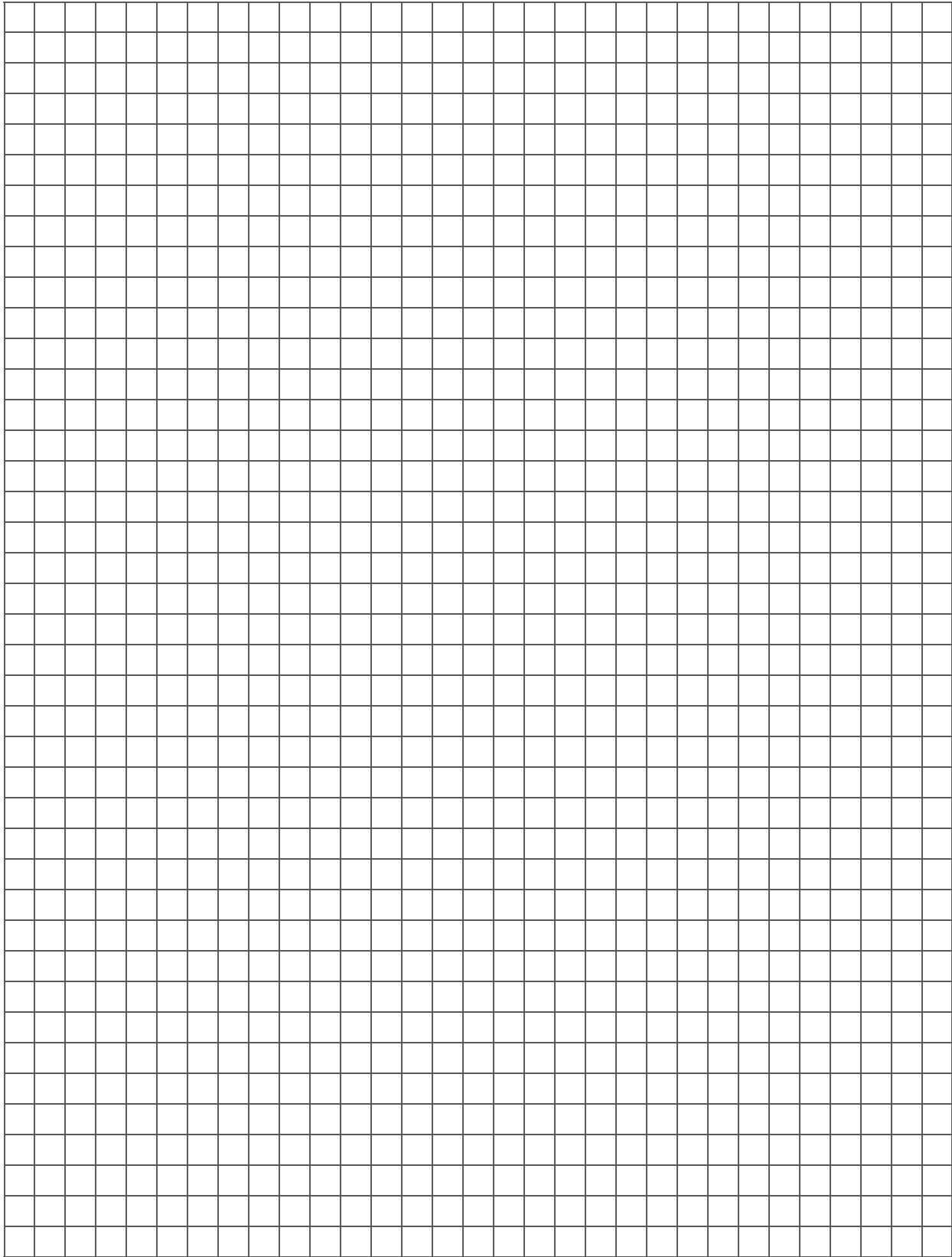
My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statements contained herein are true and that I am subject to the penalties of 18 Pa C.S.A. 4904 relating to un-sworn falsification to authorities.

SIGNATURE OF APPLICANT OR AGENT: _____

PRINT NAME: _____ DATE: _____

BOROUGH OF CRAFTON

SITE ADDRESS: _____ LOT & BLOCK: _____



BOROUGH OF CRAFTON

Residential Building Permit Application

SECTION I. • SITE LOCATION INFORMATION

SITE ADDRESS: _____ LOT & BLOCK: _____

BUILDING TYPE : 1-FAMILY 2-FAMILY NUMBER OF STORIES: 1 2 3

(If more than 2 family structure or more than three stories, a Commercial Building Permit must be filed.)

SECTION II. • PROJECT DESCRIPTION

- NEW CONSTRUCTION ADDITION ALTERATION/RENOVATION
 RETAINING WALL *(over 4 feet in height)* SWIMMING POOL DECK

GROSS FOOTAGE AREA: _____ ESTIMATED CONSTRUCTION COST: _____

ESTIMATED START DATE: _____ ESTIMATED COMPLETION DATE: _____

SECTION III. • APPLICANT/OWNER INFORMATION

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

E-MAIL _____

PROPERTY OWNER: SAME AS APPLICANT

OWNER NAME: _____

OWNER ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

E-MAIL _____

SECTION IV. • CONTRACTOR INFORMATION

CONTRACTOR NAME: _____

CONTRACTOR ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

CONTACT NAME: _____

E-MAIL _____

PA REGISTRATION NO. _____

SECTION V. • DESIGN PROFESSIONAL

(ARCHITECT or ENGINEER if applicable)

NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____ CELL: _____

CONTACT NAME: _____

E-MAIL _____

PA LICENSE NO. _____

APPLICANT MUST REVIEW AND SIGN THE REVERSE SIDE OF THIS APPLICATION

QUESTIONS REGARDING THIS APPLICATION CAN BE DIRECTED TO THE BUILDING INSPECTION OFFICE AT (412) 921-0752 x 18.

100 STOTZ AVENUE • PITTSBURGH, PA 15205 • PHONE (412) 921-0752 • FAX (412) 921-0752 • WWW.CRAFTONBOROUGH.COM

Updated 10/2021

ADDRESS:

DATE APPROVED:

PERMIT NO.

PLAN NUMBER

BOROUGH OF CRAFTON

Residential Building Permit Application

SITE ADDRESS: _____ LOT & BLOCK: _____

DETAILS OF WORK TO BE PERFORMED:

ADD ADDITIONAL PAPER AS NECESSARY TO COMPLETE DETAILS

LOT DIMENSIONS AND COVERAGE INFORMATION

(COVERAGE AS PERCENTAGE OF LOT)

LOT DIMENSIONS: _____ x _____ = _____ Sq. Ft.

EXISTING STRUCTURE: _____

EXISTING BUILDING : _____ x _____ = _____ Sq. Ft.

PROPOSED ADDITION: _____

PROPOSED AREA: _____ x _____ = _____ Sq. Ft.

TOTAL LOT COVERAGE: _____

IMPORTANT INFORMATION • PLEASE READ!

By signing below, I certify that I am the property owner or authorized agent thereof and all information contained herein and/or furnished by me along with this application is true and correct to the best to my knowledge. Furthermore, I acknowledge:

- If this building, structure or unit is not currently occupied, no occupancy is permitted until an occupancy permit is issued in compliance with Chapter § 225-145 of the Crafton Borough Code of Ordinances.
- This project will be constructed in accordance with the approved drawings and/or specifications and in compliance with the Pennsylvania Uniform Construction Code and all other applicable codes and ordinances.
- Any changes to the project from the submitted plans or documents must be approved by the Building Code Official.
- All plumbing work must be inspected by the Allegheny County Department of Health Plumbing Division.
- All electrical work shall require an electrical permit which is not included with this building permit. All electrical inspections shall be conducted by the Borough's recognized inspection agency.
- The owner or applicant agrees to provide any additional information as may be required by the Building Code Official.
- The Borough of Crafton and its authorized representatives shall have the authority to enter areas covered by such permit at any reasonable hour to inspect and enforce applicable provisions of the codes and ordinances.
- Applicant shall provide and attach hereto a copy of the construction contract with the licensed contractor.
- Contractor shall provide proof of current general liability insurance.
- Applicant shall provide and attach here to a signed copy of the Workers' Compensation Addendum.

SIGNATURE OF APPLICANT OR AGENT: _____

PRINT NAME: _____ DATE: _____

*** OFFICE USE ONLY ***

DATE RECEIVED: _____	PLAN REVIEW REQUIRED: <input type="checkbox"/> YES <input type="checkbox"/> NO
BUILDING PERMIT: <input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED	BUILDING PERMIT FEE: \$ _____
DATE ISSUED: _____	PLAN REVIEW FEE: \$ _____
INSPECTOR: _____	PA UCC FEE: \$ 4.50
PERMIT NUMBER: _____	TOTAL PERMIT FEE: \$ _____

REASON (S) FOR DENIAL: _____

ZONING DISTRICT: _____ ZONING COMPLIANCE: YES NO USE GROUP: _____

BOROUGH OF CRAFTON

WORKERS' COMPENSATION ADDENDUM

(REQUIRED TO BE ATTACHED TO ALL BUILDING PERMIT APPLICATIONS)

SITE ADDRESS: _____ LOT & BLOCK: _____

PART I

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Basis and Affidavit of Exemption

- Applicant is an Individual who owns the property.
- Contractor/Applicant is a sole proprietorship without employees.
- Contractor/Applicant is a corporation, and the only employee working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.
- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act.
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My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statements contained herein are true and that I am subject to the penalties of 18 Pa C.S.A. 4904 relating to un-sworn falsification to authorities.

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PRINT NAME: _____ DATE: _____

BOROUGH OF CRAFTON

SITE ADDRESS: _____ LOT & BLOCK: _____

