

Catharine Township Municipality

1229 Recreation Drive, Williamsburg, PA 16693
Email: catharinetownship@yahoo.com

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Required checklist to obtain a building permit for:

RESIDENTIAL SWIMMING POOL/SPA

Over 24 inches deep

- Complete 2 page Application for Building Permit/Use Certificate
- Land Use Permit (signed and approved by Municipality).
- Pool and Pump Specifications
- Site plans (include all existing structures, proposed structure and their distances to all lot lines).
- Include deck plan (if applicable)
- Worker's Compensation Insurance Coverage Information Form
- Driving instructions

Includes below ground, on ground, or above ground pools. Inflatable pools require a permit every year.

- ⇒ After submitting all required documents your application will be reviewed.
- ⇒ CCIS will contact you to let you know if your application has been approved or denied (if applicable).
- ⇒ When the project is approved you will be notified the Building Permit is ready. Prior to obtaining the building permit all charges (i.e. municipality, administrative, inspection fees...) must be paid.
- ⇒ Be advised additional fees may be applied throughout the project for failed or missed inspections.

APPLICATION FOR BUILDING PERMIT / USE CERTIFICATE

Permit Number: _____

Property / Site Information

Site Address: _____
Complete address/City/State/Zip

Municipality: _____ County: _____ Tax Map #: _____

Use: Residential ___ Single-Family dwelling ___ Multi-Family ___ New ___ Manufactured/Modular Home

Commercial ___ Other _____ Floodplain present: Yes No

Improvement Type: New Addition Alteration Repair/replacement Relocation

Other _____

Land / Property Owner's Information

First Name MI. Last Name Phone# Cell#

Street Address City State Zip Email

Building Permit Application

Provide a description of work below: (Also provide details on plot plan: Show all improvements on lot & approximate distances to lot lines)

Estimated Cost of Construction \$ _____

Estimated start date _____ Estimated completion date _____

Contractor Information

Name of Contractor: _____ Phone# _____

Person in charge of work: _____ Phone# _____

Address of Contractor _____
Address/City/State/Zip

Proof of Worker's Compensation Insurance: Provided Exempt

Subcontractor Information

Name _____ Address/City/State/Zip _____ Phone# _____

Name _____ Address/City/State/Zip _____ Phone# _____

Project Details

Trades: Building Electrical Work Plumbing Work Mechanical Work (HVAC)

Fire Suppression/Alarm System

Heat Source: _____ Fuel Type: _____

Foundation Type: Crawlspace Foundation Slab at Grade Piers Other _____

Details: _____

Certification

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code Official or his/her representative shall have the authority to enter the areas in which work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project. I further certify that this information is true and correct to the best of my knowledge and belief.

Applicant Signature _____ Print Name _____ Date _____

Applicant Phone# (Land line and Cell) _____ Email _____

Applicant Complete Address/City/State/Zip _____

OFFICE USE:	
Application fee \$ _____	Issuance Date ____/____/____
Permit Fee \$ _____	Expiration Date ____/____/____
Inspection Fees \$ _____	Extension Date ____/____/____
APPLICATION STATUS: <input type="checkbox"/> GRANTED <input type="checkbox"/> DENIED	
_____ Signature of Permit Officer	_____ Date
	{SEAL}

Land Use Permit Checklist

NOTE TO APPLICANT: Applicable items on this checklist shall be completed prior to your submission of an application for a building permit. Failure to complete any applicable item on this checklist shall be sufficient grounds for denial of the building permit application. Please contact your local municipal office or the local Commonwealth Code Inspection Service, Inc. office if you have any questions about the process for obtaining a building permit.

Municipality: Catharine Township County: Blair

Land Use Permit #: _____ Tax map location: _____

Work site address: _____

Contact person: _____ Phone: _____

Address: _____

Type of Construction (describe): _____

New Additions Alteration Repair/Replacement Relocation Other _____

Estimated Start Date: _____ Estimated Completion Date: _____

Estimated cost/value of construction: \$ _____

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record, and I agree to conform to all applicable local, state, and federal laws governing the execution of this project. I certify that the Code Official or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable laws of this jurisdiction. I further certify that this information is true and correct to the best of my knowledge.

Applicant's signature _____ Date _____

Checklist of preliminary requirements for obtaining a building permit, approvals to be obtained prior to applying for a building permit. All items must be addressed. Mark N/A for those that are not applicable. Attach extra sheets if necessary to identify special requirements or conditions.

- | | Date of Approval |
|---|------------------|
| <input type="checkbox"/> Sewage facilities planning module, DEP Planning Code # _____ | _____ |
| <input type="checkbox"/> Sub-division & Land Development, Municipal Resolution # _____ | _____ |
| <input type="checkbox"/> Sewage permit from Sewage Enforcement Officer, Permit # _____ | _____ |
| <input type="checkbox"/> Storm water management module. Approved by _____ | _____ |
| <input type="checkbox"/> Conservation District notification per Chapter 102 | _____ |
| <input type="checkbox"/> NPDES Permit # _____ for earth disturbances 1 acre or more | _____ |
| <input type="checkbox"/> Driveway permit, PennDot # _____ or Local # _____ | _____ |
| <input type="checkbox"/> Public water tap, Permit # _____ | _____ |
| <input type="checkbox"/> Public sewage tap, Permit # _____ | _____ |
| <input type="checkbox"/> Historical Architectural Review Board, ____ Check here for special conditions | _____ |
| <input type="checkbox"/> Other; slue pipe, road alteration, etc. ____ Check here for special conditions | _____ |
| <input type="checkbox"/> Floodplain mapping. Project may contain flood plain, ____ | _____ |
| <input type="checkbox"/> Municipal setback clearances, ____ Check here for special conditions | _____ |
| <input type="checkbox"/> Extra pages attached to describe special conditions or circumstance. There are ____ extra pages. | _____ |

Approved-Municipal Official's Signature & title _____ Date _____

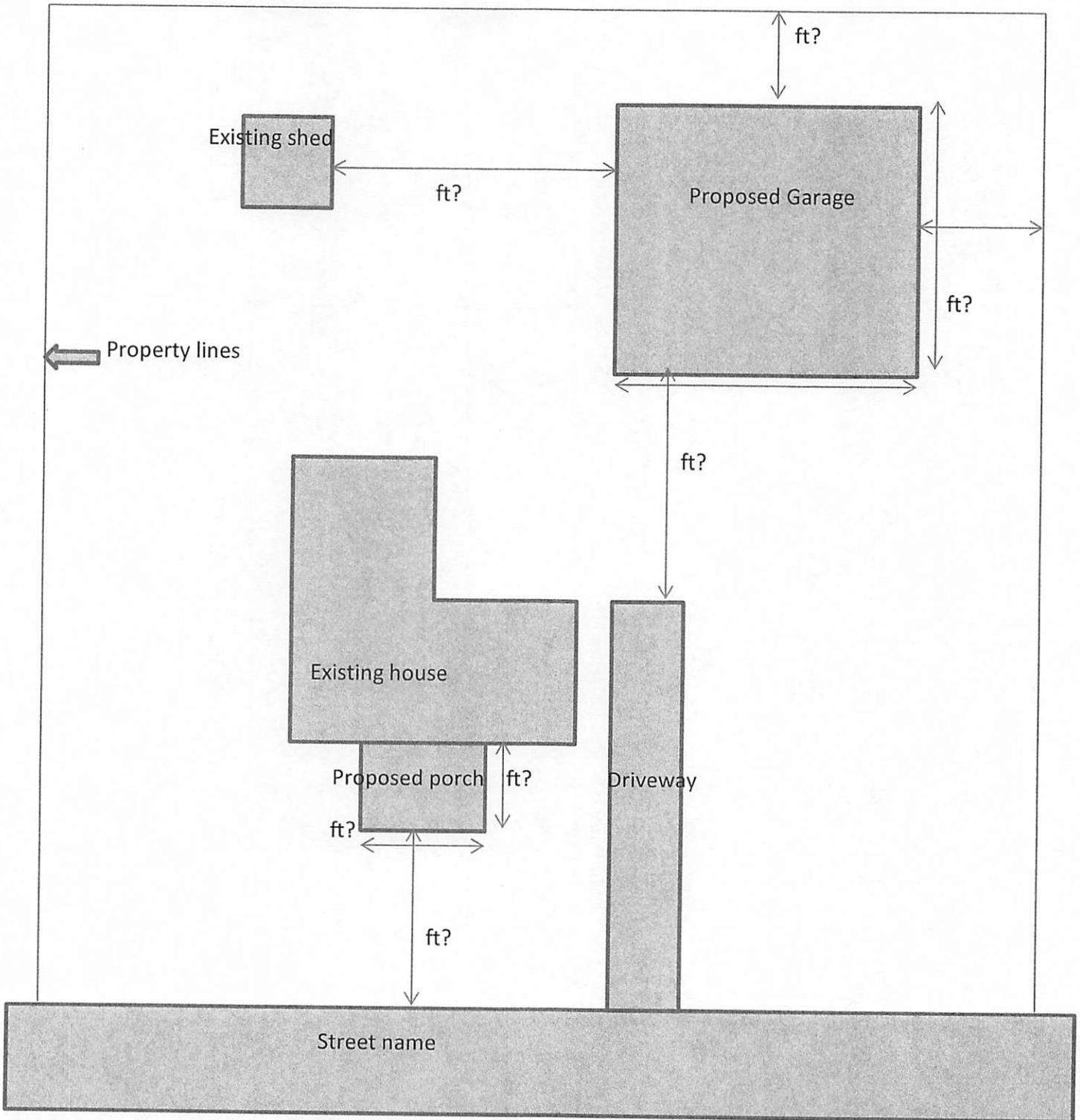
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This signature indicates Municipal verification & approval of the Land Use Project as described along with approval of all items on the Checklist.

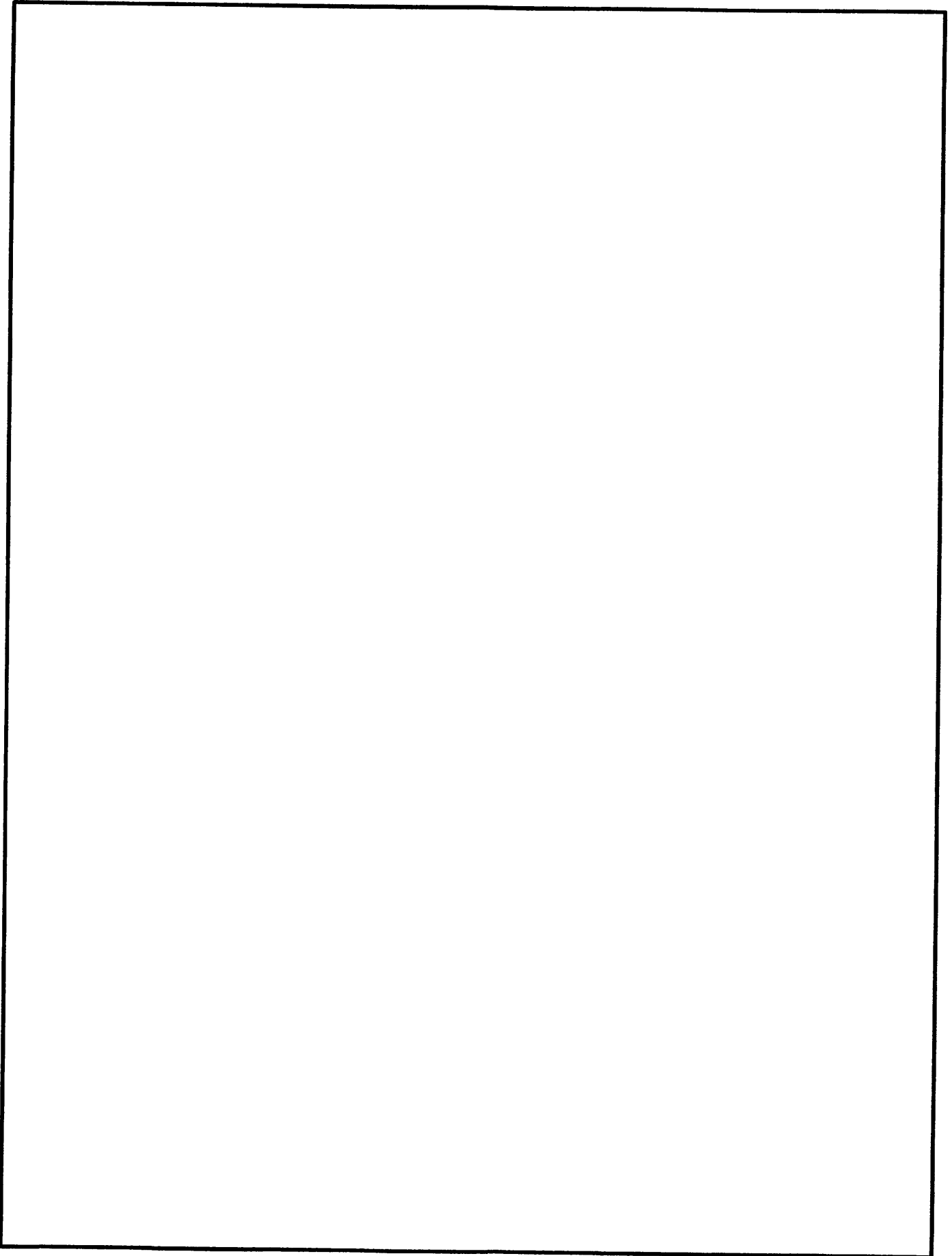
SITE PLAN

EXAMPLE

Show any other existing structures on the property (pool, patio, deck, etc.)



SITE PLAN



Worker's Compensation Insurance Coverage Information

A. The applicant is a contractor within the meaning of Pennsylvania Workers' Compensation Law.
 YES NO

If the answer is YES, complete Section B. If there is an exemption, then complete Section C below.
If the answer is NO, complete Section C below.

B. Insurance Information:

Name of Applicant: _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for Workers' Compensation

Original Certificate attached

Name of Workers' Compensation insurer _____

Workers' Compensation Insurance Policy No. _____

Original Certificate attached

Policy Expiration Date _____

C. Exemption: MUST BE NOTORIZED

Complete this section if the applicant is a contractor or homeowner claiming exemption from providing workers' compensation insurance. The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's Worker's Compensation Law for one of the following reasons, as indicated.

- Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to Municipality.
- Homeowner who elects to perform all of the work without contracting or hiring others to assist.
- Religious exemption under Workers' Compensation Law

Signature of Applicant: _____ Date: _____

Address: _____

Commonwealth of Pennsylvania

County of _____

On this, the _____ day of _____, 20____, before me _____ the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name subscribed to the within instrument, and acknowledged that he/she executed the same for the purposes therein contained.

In witness whereof, I hereunto set my hand and official seal.

Notary Public

DIRECTIONS TO THE SITE LOCATION

Fill out completely

Name of Owner: _____

Phone Number: _____

Address of project: _____

Directions:

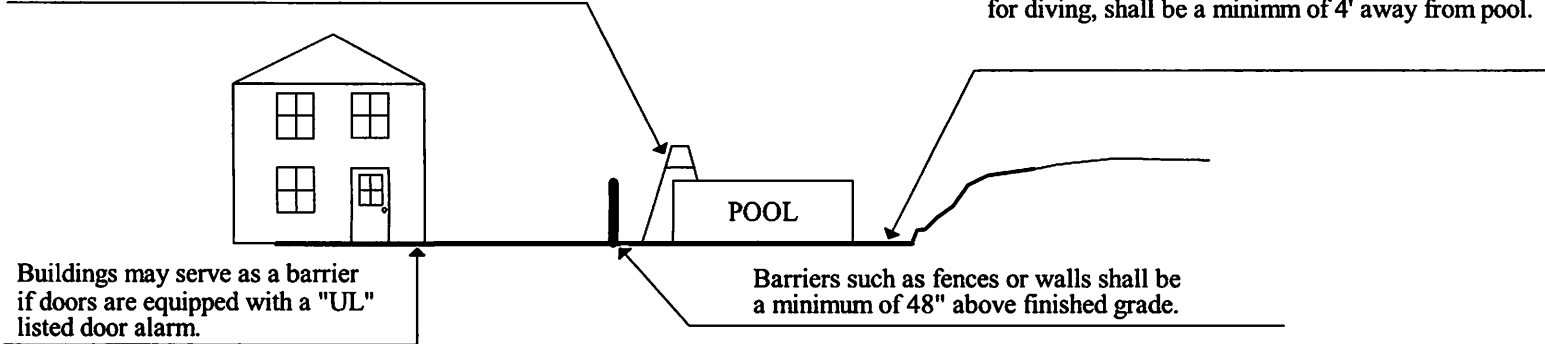
*Please note directions should be clear so inspectors can find the address with no difficulties. Use Street names, landmarks, direction of travel, turn off distance, etc...

Use space below if needed to further clarify the site location:

POOL BARRIER REQUIREMENTS

Removeable pool ladder may serve as a barrier if the pool sides are a minimum of 48" above finished grade.

Features such as banks, walls, etc., that can be used for diving, shall be a minimum of 4' away from pool.

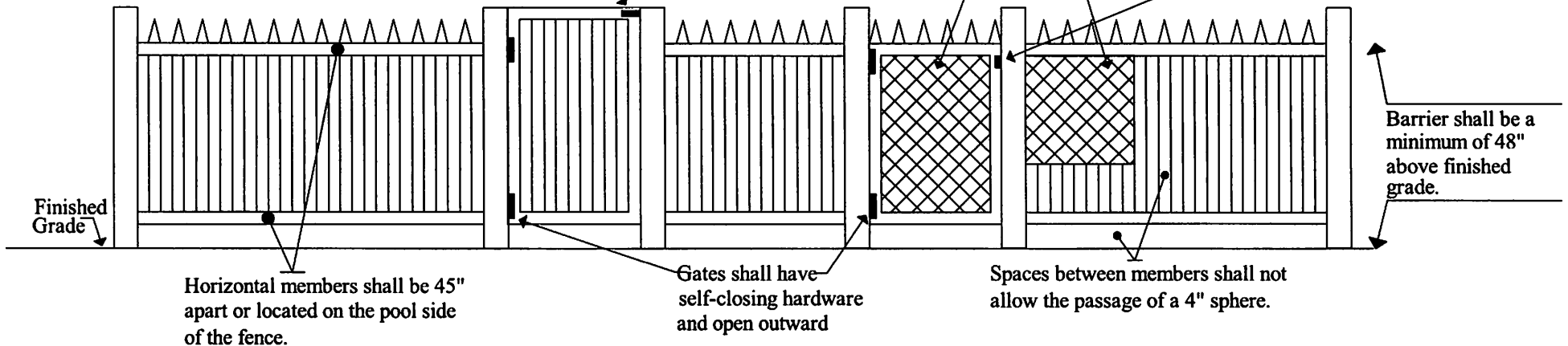


Buildings may serve as a barrier if doors are equipped with a "UL" listed door alarm.

Barriers such as fences or walls shall be a minimum of 48" above finished grade.

Latch may be located on the inside or outside of the gate if is 54" minimum above finished grade

If latch is less than 54" above finished grade, latch shall be located on the inside, 3" below top, and no opening greater than 1/2" shall be located within 18" of latch.



Finished Grade

Horizontal members shall be 45" apart or located on the pool side of the fence.

Gates shall have self-closing hardware and open outward

Spaces between members shall not allow the passage of a 4" sphere.

Barrier shall be a minimum of 48" above finished grade.

If the deck serves as a barrier to a swimming pool, the following code section applies:

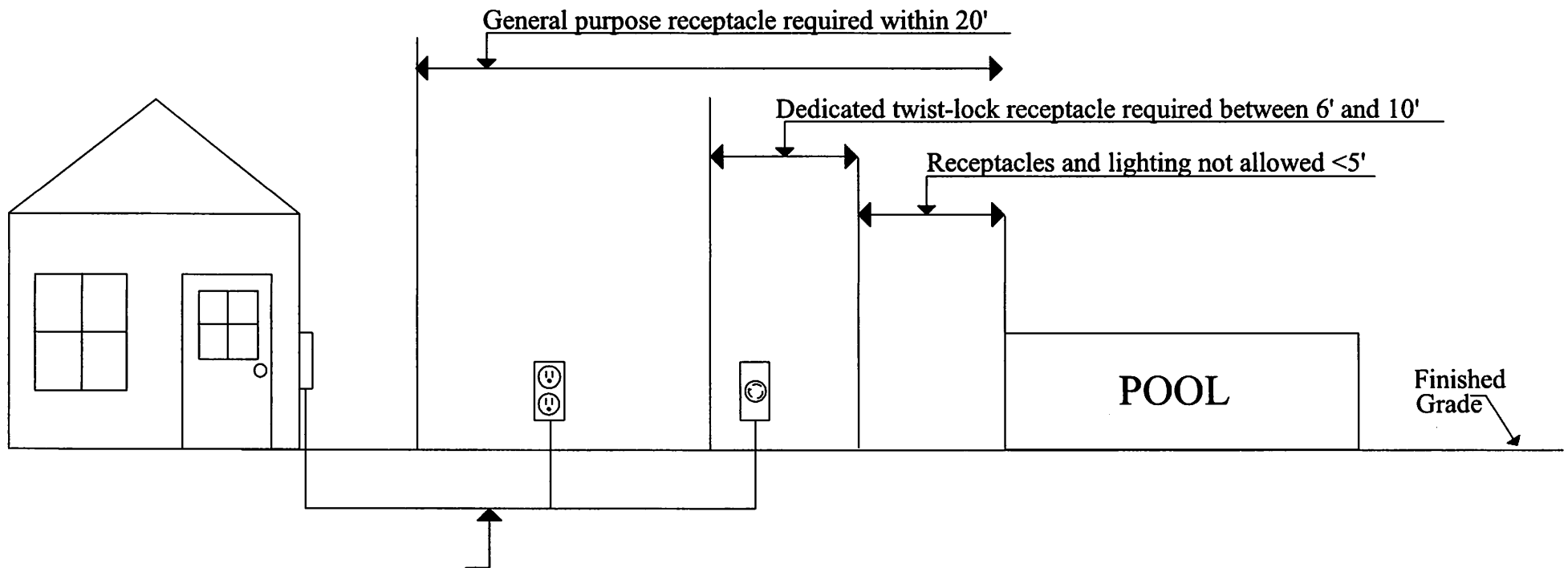
SECTION AG105

BARRIER REQUIREMENTS

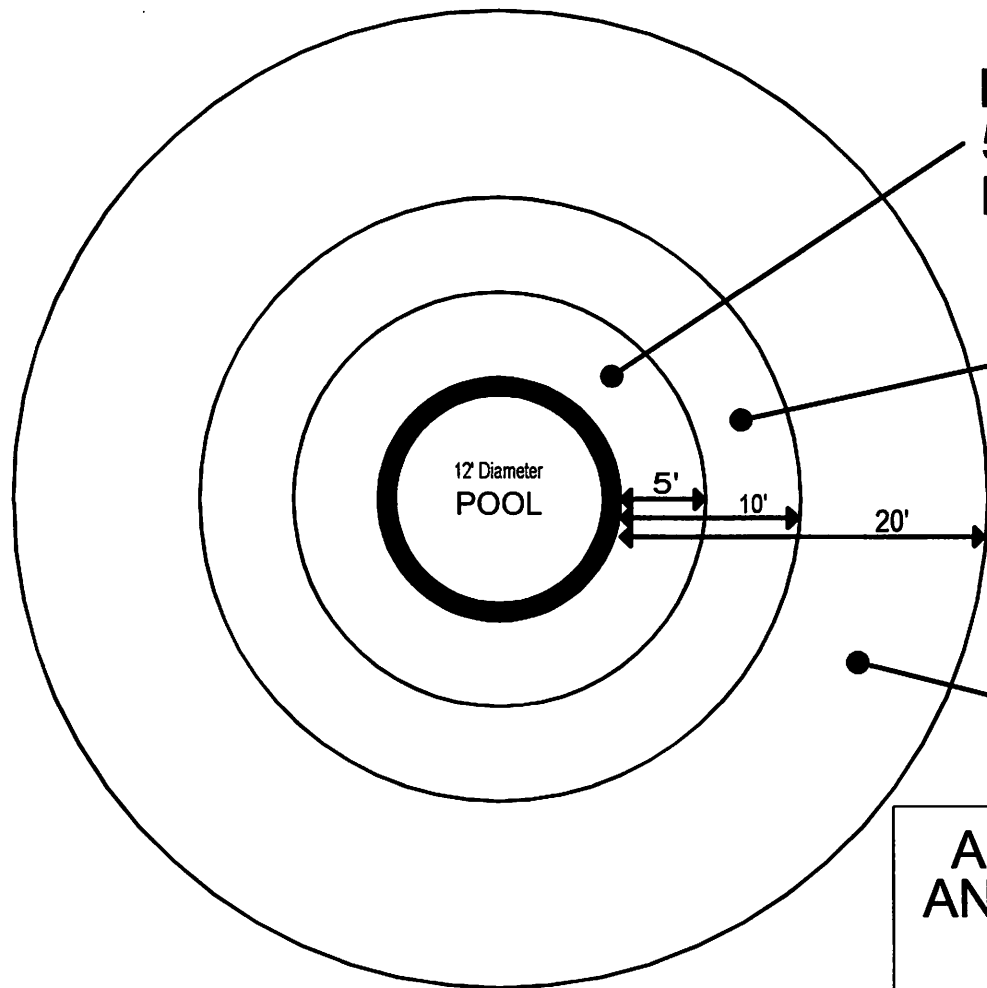
AG105.2 Outdoor swimming pool. An outdoor swimming pool, including an in-ground, above-ground or on-ground pool, hot tub or spa shall be surrounded by a barrier which shall comply with the following:

1. The top of the barrier shall be at least 48 inches (1219 mm) above grade measured on the side of the barrier which faces away from the swimming pool. The maximum vertical clearance between grade and the bottom of the barrier shall be 2 inches (51 mm) measured on the side of the barrier which faces away from the swimming pool. Where the top of the pool structure is above grade, such as an above-ground pool, the barrier may be at ground level, such as the pool structure, or mounted on top of the pool structure. Where the barrier is mounted on top of the pool structure, the maximum vertical clearance between the top of the pool structure and the bottom of the barrier shall be 4 inches (102 mm).
 2. Openings in the barrier shall not allow passage of a 4-inch-diameter (102 mm) sphere.
 3. Solid barriers which do not have openings, such as a masonry or stone wall, shall not contain indentations or protrusions except for normal construction tolerances and tooled masonry joints.
 4. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is less than 45 inches (1143 mm), the horizontal members shall be located on the swimming pool side of the fence. Spacing between vertical members shall not exceed 13/4 inches (44 mm) in width. Where there are decorative cutouts within vertical members, spacing within the cutouts shall not exceed 13/4 inches (44 mm) in width.
 5. Where the barrier is composed of horizontal and vertical members and the distance between the tops of the horizontal members is 45 inches (1143 mm) or more, spacing between vertical members shall not exceed 4 inches (102 mm). Where there are decorative cutouts within vertical members, spacing within the cutouts shall not exceed 13/4 inches (44 mm) in width.
 6. Maximum mesh size for chain link fences shall be a 2 1/4-inch (57 mm) square unless the fence has slats fastened at the top or the bottom which reduce the openings to not more than 13/4 inches (44 mm).
 7. Where the barrier is composed of diagonal members, such as a lattice fence, the maximum opening formed by the diagonal members shall not be more than 13/4 inches (44 mm).
 8. Access gates shall comply with the requirements of Section AG105.2, Items 1 through 7, and shall be equipped to accommodate a locking device. Pedestrian access gates shall open outward away from the pool and shall be self-closing and have a self-latching device. Gates other than pedestrian access gates shall have a self-latching device. Where the release mechanism of the self-latching device is located less than 54 inches (1372 mm) from the bottom of the gate, the release mechanism and openings shall comply with the following:
 - 8.1. The release mechanism shall be located on the pool side of the gate at least 3 inches (76 mm) below the top of the gate; and
 - 8.2. The gate and barrier shall have no opening larger than 1/2 inch (13 mm) within 18 inches (457 mm) of the release mechanism.
 9. Where a wall of a dwelling serves as part of the barrier, one of the following conditions shall be met:
 - 9.1. The pool shall be equipped with a powered safety cover in compliance with ASTM F 1346; or
 - 9.2. Doors with direct access to the pool through that wall shall be equipped with an alarm which produces an audible warning when the door and/or its screen, if present, are opened. The alarm shall be listed in accordance with UL 2017. The audible alarm shall activate within 7 seconds and sound continuously for a minimum of 30 seconds after the door and/or its screen, if present, are opened and be capable of being heard throughout the house during normal household activities. The alarm shall automatically reset under all conditions. The alarm system shall be equipped with a manual means, such as touch pad or switch, to temporarily deactivate the alarm for a single opening. Deactivation shall last for not more than 15 seconds. The deactivation switch(es) shall be located at least 54 inches (1372 mm) above the threshold of the door; or
 - 9.3. Other means of protection, such as self-closing doors with self-latching devices, which are approved by the governing body, shall be acceptable so long as the degree of protection afforded is not less than the protection afforded by Item 9.1 or 9.2 described above.
 10. Where an above-ground pool structure is used as a barrier or where the barrier is mounted on top of the pool structure, and the means of access is a ladder or steps:
 - 10.1. The ladder or steps shall be capable of being secured, locked or removed to prevent access; or
 - 10.2. The ladder or steps shall be surrounded by a barrier which meets the requirements of Section AG105.2, Items 1 through 9. When the ladder or steps are secured, locked or removed, any opening created shall not allow the passage of a 4-inch-diameter (102 mm) sphere.
- AG105.3 Indoor swimming pool.** Walls surrounding an indoor swimming pool shall comply with Section AG105.2, Item 9.
- AG105.4 Prohibited locations.** Barriers shall be located to prohibit permanent structures, equipment or similar objects from being used to climb them.
- AG105.5 Barrier exceptions.** Spas or hot tubs with a safety cover which complies with ASTM F 1346, as listed in Section AG107, shall be exempt from the provisions of this appendix.

ELECTRICAL TIPS FOR SWIMMING POOL INSTALLATIONS



Branch circuit for permanent pools (those capable of being filled with over 42" of water) shall be pulled in electrical non-metallic tubing (pvc). Burial depth shall be a minimum of 18". Receptacles shall be GFCI protected.



No receptacles or lighting within 5' of the pool. No buried electric lines within 5' of the pool.

Single twist-lock receptacle allowed for pump >5' and <10'. No overhead electric lines within 10'.

120 volt convenience outlet shall be located within 10' to 20' of the pool.

ALL RECEPTACLES SERVING THE POOL AND ALL OUTDOOR RECEPTACLES SHALL BE GFCI PROTECTED