COMMERCIAL BUILDING PERMIT APPLICATION CHECKLIST

TOWNSHIP OF MOON

This checklist is intended as a general list of what may be required for the building permit. Before submitting for a permit, communicate with the Building Code Official by email, dmeinert@moontwp.us, to verify exactly what information is required for your specific job. Dave Meinert direct (412) 262-1700 ext. 109

	Fill out and sign the "Commercial Building Permit Application" form. Incomplete application can result in a denied permit. Building permit fee is paid after approval and when it is picked up.
	Fill out the separate "Electrical Permit Application" and Must include the electrical permit fee check, see electrical permit fee schedule, payable to "Township of Moon".
	Fill out and sign the "Permit Agreement" form.
	Fill out and sign the "Workers Compensation Affidavit of Exemption" form <i>OR</i> Provide proof of Workers Compensation Insurance Certificate and name Moon Township as a certificate holder.
	Fill out and sign the "Design Professional Certification".
	Provide 2 complete sets of construction drawings, (NOT ELECTRICAL AND PLUMBING DRAWINGS) (stapled and binding strip) with Design Professional Seal as per attached "UCC Plan Review Checklist" (include building, structural, mechanical, fuel gas, plumbing, energy, com-check, and accessibility plans and details in compliance with ICC A117.1 "Accessible and Usable Buildings and Facilities" fire protection and alarm, shop fabricating drawings.
	Provide 2 complete, folded sets of ELECTRICAL DRAWINGS ONLY drawings with Design Professional Seal.
	Provide 2 complete, folded sets of Site Utility plans with Survey Engineer Seal. Show accessible route and accessible parking.
	Provide 2 copies of Energy Conservation Code Compliance Certification Perceptive Method or approved method with details and specifications.
	Provide statement of special inspections as per International Building Code, Chapter 17 (use Township provided forms and guide). Submit completed and signed "Special Inspections Agreement". Submit information, qualifications, resumes on the special inspections company and each special inspector.
	Provide previous PA Labor and Industry Occupancy Certificate if this is an existing building constructed before April 9, 2004. Available at the following link. Provide DEP Planning Module and letter of approval from MTMA for sewer and water service.
	Provide final approval from Moon Township Planning Commission and Moon Township Board of Supervisors Conditional Use and Zoning Variances.
	Provide rooftop, mechanical equipment, and screening details.
	If applicable, fill out the "FAA Notification Affidavit – FAA Form 7460-1 – Notice of Proposed Construction or Alteration" required for all construction projects only required when using a crane.
	Provide Health Care Facilities State UCC Compliance and PA State Licensing Regulations/State Department of Health Plan approval verification.
	Provide Child Day Care Facilities PA State UCC, Section 403.23 review and approval.
	Provide Wind Load Calculations as per IBC minimum design mph.
	Provide Pennsylvania Highway Occupancy Permit.
	Carnot Village or University Boulevard Overlay District.
ire pr lumb	otection and notification design drawings and shop drawings can be submitted later with deferred submittal form. ing Permit and plumbing inspections are through Allegheny County Health Department, Plumbing Division,

MOON TOWNSHIP COMMERCIAL PERMIT SUBMITTAL INFORMATION DETAILS

All submittals must be hard copies

Attached pdf commercial checklist doc has all the forms

Attached word commercial checklist doc has highlighted all the information required to be submitted at the same time all together

Please make sure to read all the docs to make sure all information is submitted accurately. Submit all the information highlighted together at the same time.

Drawings must have all the required information listed in the attached checklist especially the cover sheet with all applicable codes. I attached a doc that has all the listed current codes.

Accessibility reach range max is 48". All knobs, pull stations, fire extinguisher cabinet, switched, thermostat controls, etc. etc. must be detailed as being located "below" 48", not to the center.

A strobe horn device mounting dimensions / detail is required.

A detail showing mounting height and locations of all tactile text and braille signs is required as per both details for braille and text in ANSI A117.1-2009

Electrical permit application is required with the fee check at the time of building permit request submittal. The electrical permit fee schedule is attached.

Building permit fee is pain after permit approval when it's picked up.

The attached gas test form is for later in the job and is needed as part of the framing inspection.

The attached deferred submittal form is for later when the sprinkler drawings are completed and ready to be submitted for review.

All applicable codes must be listed accurately on the cover sheet.

Drawings must be stapled and bound.

All drawings must have design professional seal affixed.



COMMERCIAL BUILDING PERMIT APPLICATION

Applicant's Name:						
Applicant's Phone No.:			Email:			
Applicant's Address:	Stu	reet		011		
Project Description:				City	State	e Zij
Property Information:						
Zoning District:	County I	Lot & Block No.:		_ Lot Size:		
Subdivision Name:				Lot No :		
What is the Existing Use of Bui	lding (If Applicable):					
What is the Proposed Change i	n Use (If Applicable):					
Owner's Name:						
Owner's Phone No.:			Email:			
	Stree	et		City	State	Zip
Occupant's Name:			_Occupant's Phone	e No.:		
Water Supply: Public] Private Sewage	: Public 🗌	Private Type	of Heat: G	as \square	Electr
Zoning Setbacks (the distar						
Front Yard:				1 0 4 6:4-		
Building Code Information t	or Proposed Const	ruction:	olue	Left Side:		
Total Cost of Construction:	ICC Occ Classif	fication.	ICC Cone	truction Type:		
Total Cost of Construction: New Construction:		(TBD by a De:	sign Prof.)	duction Type	TBD by a D	Design Pro
1 0 100, 10, 10, 10, 11, 41, 41, 41, 41, 41, 41, 41, 41, 41						
No. of Stories: Size of S Area Breakdown: 1st Ftr:	and Cir.	Ft. Long:	Total Ht of Blo	dg.:Tot	al Area:	
Area Breakdown: 1 st FIr: Exterior Finish to Grade: ☐ [Brick ☐ Siding [Other Architectu	Ad	dt'i Floor and Ar	ea:	
Sprinklers: Yes		_ Other Architecti	urai Firiisti (Specity)			
nterior Alterations:	10					
No. of Stories of Extg. Structure:	Type of Extq.	Construction:		Total Area of Ex	da Dida	
What Floor(s) is the Alterations to	Occur:		Total Floor Area	Altered:	rig blug	
Sprinklers: 🗌 Yes 🔲 N			rotal Floor Alica A	arcieu		
dditions:						
lo. of Stories of Exist. Structure:	Exist. Bldg Sp	orinklered? 🗆 Y	es 🗌 No Add.	Sprinklered? [Yes	☐ No
lo. of Stories (Addition):	Size of Add.:	x To	tal Add. Area:	Add. He	eiaht:	
ontractor's Company Name:						
					-	
The detail of todal coo.	Street		City		State	Zip
			Contact Person:			
esign Prof. Company Name:		Email:	Contact Person: _			
esign Prof. Company Name: ontact Phone No.:		Email:	Contact Person: _			

The are grants Moon Township Officials the right to enter onto the property for inspecting the work permitted and posting notices. As Applicant, I hereby certify that proposed work is authorized by the Owner of record and I have been authorized by the Owner to make this application as his authorize agent.

Applicant/Owner's Signature:

In considering of the issuance by the Township of Moon (the "Township") of a Building Permit, Zoning
Permit and other permits for the property located at
and to the undersigned property Owner(s) or the Agent(s) (the "Applicant"), the Applicant acknowledges that, in reviewing plans and specifications, in issuing permits and inspection work of the Applicant; the employees, consultants, elected or appointed official of the Township are only performing their duties to require compliance with the minimum requirements of the applicable ordinances of the Township and the minimum requirements of the applicable ordinances of the Township and the Pennsylvania Uniform Construction Code pursuant to the police power of the Township and are not warranting to the Applicant or to any third party the quality of adequacy of the design, engineering or work of the Applicant or their agents or contractors.
Applicant further acknowledged that although plan review and inspections will be provided, it will not be possible for the Township to review every aspect of the Applicant's design and engineering or to inspect every aspect of the Applicant's work. Accordingly, neither the Township nor any of its elected appointed officials, consultants, or employees shall have any liability to the Applicant for defects or shortcomings in such design, engineering or work, even if it is alleged that such defects or shortcomings should have been discovered during the Township's review or inspection, Furthermore, the Applicant agrees to defend, hold harmless and indemnify the Township, its elected officials, consultants and employees from and against any and all claims, demands, actions, and causes of actions of any one or more third parties arising out of or relating to the Township's review or inspection of the Applicant's design, engineering, or work or issuance of a permit or permits, or arising out of or relating to the design, engineering or work done by Applicant pursuant to such permit or permits. All references in this Agreement to Applicant's design, engineering or work shall include such design, engineering, and work, which is performed by the Applicant or by the Applicant's employees, agents, independent contractors, subcontractors or any other person or entities performing work pursuant to the issuance of the Building Permit Zoning Permit and other permits by the Township.
Owner/Agent's Signature Date
Print Name

WORKERS COMPENSATION AFFIDAVIT OF EXEMPTION

The insurance ui indicated:	undersigned swears or affirms that he/she is not required to provide workers' compensation nder the provisions of Pennsylvania's Workers' Compensation Act for one of the following reasons, as
	Contractor is a sole proprietorship with no employees.
	Religious exemption under Section 304.2 of the Workers' Compensation Law.
	Contractor is a corporation and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act. Please explain:
	Owner is the Contractor
	Other: Please explain:
Pleas 1.	e be aware of the following requirements under the Pennsylvania Workers' Compensation Act: Any subcontractors used on this project will be required to carry their own workers' compensation
2.	Violation of the Worker's Compensation Act or the terms of this information form will subject the Contractor to a stop-work order and other fines and penalties as provided by law.
My sig statements cor	nature on behalf of or as the Contractor as stated on this form constitutes my verification that the stained here are true.
Signature	Date
	print) Contact No

DESIGN PROFESSIONAL CERTIFICATION

Please be advised that I,				have designed
Please be advised that I,	(Ar	chitect's/Engineer's N	lame)	
the plans for(Co	onstruction Project Name,)		permit review to the
Township of Moon for proposed con	struction of			
			(Project Description)	
located at(Street Addre	ss of Proposed Construc	tion)	to the bes	st of my knowledge
These plans, numbered page				have
been designed to meet the requirement	ents of the Township	o of Moon Ordina	nce Chapter 5, Code	Enforcement and
current applicable Pennsylvania Stat	e Uniform Construct	tion Code (UCC).		
All ANSI A 117.1 accessibility code d	imensional requirem	nents and maximu	um and minimum rar	nges and tolerances
are permitted. All absolute dimension				
Design Professional's Signature	×		Date	
Design Professional's Name Printed				
(Affix Professional Seal)				

FAA NOTIFICATION AFFIDAVIT

FAA FORM 7460-1 NOTICE OF PROPOSED CONSTRUCTION OR ALTERATION

TOWNSHIP OF MOON

Federal Regulation (14 CFR) Part 77 establishes standards and notification requirements for objects affecting navigable airspace. This notification serves as the basis for:

- Evaluating the effect of the construction or alteration on operating procedures.
- Determining the potential hazardous effect of the proposed construction on air navigation.
- Identifying mitigating measures to enhance safe air navigation.
- Charting of new objects.

Notification allows the FAA to identify potential aeronautical hazards in advance thus preventing or minimizing the adverse impacts to the safe and efficient use of navigable airspace.

On-Airport proposals within the FAA Central Region, the sponsor should E-file the required information at https://oeaaa.faa.gov/oeaaa/external/portal.jsp.

Off-Airport proposals, the sponsor should make every attempt to E-file the required information at https://oeaaa.faa.gov/oeaaa/external/portal.jsp if unable mail the completed 7460-1 form to the following address:

Mail Processing Center Federal Aviation Administration Southwest Regional Office Obstruction Evaluation Group 10101 Hillwood Parkway Fort Worth, TX 76177

Persons failing to comply of the Federal Aviation Act of 195	with the provisions 8, as amended and	of FAR Part 77 are subje pursuant to 49 U.S.C. Se	ct to civil penalty under Section 902 oction 46301(a).
l,	(Name)	acting of	on behalf of the Owner/Contractor
(Owner/Contractor Na	nme)	Hereby affirm that the N	otice of Proposed Construction or
Alteration FAA Form 7460-1 has b	peen provided to the	Federal Aviation Adminis	stration (FAA) a minimum of
45 days prior to construction for _			
located at		(Proj	ect Name)
Owner/Contractor Signature			Date
Owner/Contractor Name Printed			
	Contact Joe Amus	so with any questions at:	
	Allegheny County Pittsburgh Internat Landside Termina P.O. Box 12370 Pittsburgh, PA 15	tional Airport I, 4 th Floor Mezz.	(412) 472-3536 jamuso@flypittsburgh.com

CODES AND STANDARDS

ENFORCED UNDER THE MOON TOWNSHIP / PENNSYLVANIS UNIFORM CONSTRUCTION CODE

Applicable codes on or after October 1, 2018 are the 2015 editions of the International Code Council codes adopted by the Pennsylvania Uniform Construction Code RAC.

New Industrialized (modular) homes will utilize the 2015 ICC codes

All accessibility design will utilize the Accessibility provisions of the 2018 IBC and the 2018 IEBC.

This includes, and references design requirements utilizing the ICC - ANSI A117.1-2009 Accessibility Code.

More information on the Pennsylvania Uniform Construction Code is available on the PA Labor and Industry website.

SITE PLANS
Site plans shall be prepared to scale, with legend, north arrow, and separate vicinity (site location) map.
Show the correct street address, parcel number and required municipal zoning (if there is local zoning ordinance) on the site plans.
Show and identify all property lines and rights-of-way, with distance from property lines and adjacent buildings on site plans.
Show all accessible parking spaces and signage per ICC/ANSI A117.1 and the <i>International Building Code</i> on site plan. Provide enlarged dimensioned plan and details for all accessibility components.
Show accessible curb cuts, ramps and access ways to the building, accessible route from parking to building.
Show all existing and proposed driveway entrances.
Identify adjacent land uses and zoning.
Show all easements, flood ways, and required buffers.
Show existing and proposed utilities to serve the site, including fire hydrant locations.
Show existing and proposed finish grades.
Show details, sections, and elevations needed for construction.
Show all buffer and screening landscaping.
Show all required parking and loading spaces and calculations.
TITLE PAGE COVER SHEET
☐ Written Scope of Work
☐ Sheet Index
List of Applicable Codes (see Codes and Standards Enforced under the UCC, attached to this packet)
Code analysis/code data, type of construction, IBC Use Group occupancy classification, number of stories, fire sprinkler, fire alarm, floor area of renovation/new, occupancy load calculation, energy compliance depth, height and area, etc.
Name and Address of Project
Contact, Architect, and Property Owner Information (including name, mailing address, email, and contact number)
Design Professional Seal and Signature
Location Map
ARCHITECTURAL PLANS
 Show architectural floor plans of each floor. Indicate the approved, tested hourly rating, number and location of all members and assemblies (walls, columns, floor and ceiling, and ceiling and roof fire-rated design assemblies). Show all fire-rated walls (both existing and new) with their ratings, if not shown elsewhere. Drawings submitted without required fir-rated walls shown will be rejected. Show the square footage of each floor on the corresponding floor plans.
Identify the names and uses of each room.
Egress, travel distance, door, stair, capacity requirements, etc. Furnish floor schedule(s) including size, type, rating (if any), and hardware.
Provide all glazing schedules.

Show elevations with dimensions defining overall building height, floor-to-floor heights or heights to ridge and eave as applicable to the type of building construction listed on the UCC application. (Note: Where an existing building is involved, photographs of all sides of the building may be submitted to show elevations. These will be acceptable only if they show all elements necessary to determine compliance with the UCC.)
Provide basement percentage-below-grade basement calculations.
Indicate roof slopes, drainage system and sized through wall scuppers, if applicable to the project.
Show fixed seating for assembly occupancy to allow determination of occupancy posting required by International Building Code.
Show wall sections with proposed material sizes, construction and fire-rated assemblies.
Show proposed plumbing fixtures and privacy screens on the plans.
If masonry construction is proposed, include the following information:
☐ Type of brick ties
☐ Control joints
Placement of wall flashing and reinforcement.
If appropriate for the proposed occupancy, plans should identify all hazardous material control areas, fire barriers and the required fire-resistance ratings for these barriers. All identified control areas shall list the name, class, quantity and method of storage of all hazardous materials processed, manufactured or used in a manufacturing process and contained within its fire barriers. Provide a Material Safety Data Sheet for each listed hazardous material.
☐ Show the floor slab vapor barrier.
Show foundation water-proofing, if applicable.
 All penetrations of fire-rated construction must be per manufacturer's details. The details shall meet or exceed the rating of construction being penetrated. The penetration details shall be exactly as tested by an approved testing laboratory or agency and shall include their system numbers. New penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs. Show penthouse drawings.
Provide on the drawings the calculations for the means of egress widths for the entire floor occupancy load and the existing capacity of all exits including all stairs, doors, corridors and ramped exits.
FIRE PROTECTION PLANS
Complete a sprinkler design data sheet and include it on the first plan of the sprinkler drawings.
 Show floor plans for each floor with sprinkler piping layout, pipe sizes, pipe hanger details, piping materials, doors, walls and room identities. Often, these shop drawings are not available at the time of initial plan submission. If this is the case, write in "NA," but note the following: These shop drawings must be submitted for department review and approval at least two weeks before the projected installation date. Failure to obtain approval of these drawings before installation could result not only in delay of the final inspection and issuance of an equipment of the final inspection and issuance of an equipment of the final inspection.
which fail to meet UCC requirements.
Show ceiling plans with sprinkler head(s) layout, walls, soffits, openings, doors, dimensions and room identities.

	Verify system design by providing budget if
	 ✓ Verify system design by providing hydraulic calculations along with the following: ☐ Recent water flow test.
	☐ Ten percent safety margin.
	Type of backflow-preventer or reduced pressure zone showing equivalent foot loss.
	☐ Fire pump summary.
,	For residential occupancies such as apartments and condominiums, show sprinkler head locations at breezeways, if applicable.
l	Indicate the certified testing laboratory agency (e.g., U.L.), their test number and hourly ratings of all new and/or affected rated members and assemblies (i.e. columns, beams, floor/ceiling and ceiling/roof fire-rated design assemblies). Show all new and/or affected fire-rated walls with their ratings, if not shown elsewhere.
_	ratings of construction being penetrated. Penetration details shall be exactly as tested by a certified testing laboratory or agency and shall include their system numbers. All new penetrations of existing fire-rated walls and assemblies shall be shown with appropriate designs.
L	Provide a fire alarm riser showing connection to a UL-approved central station. Show tamper switches on both OS and Y valves of backflow prevention device, unless shown elsewhere.
L	Indicate commodity class and height of any storage.
	Provide Material Safety Data Sheets for any hazardous materials (also specified under "Architectural Plans").
	Where special temperature-rated or high-temperature sprinklers are required, show sprinkler type(s) per area, office size, cut sheets with K-factor, water requirements, spray pattern, coverage and other pertinent data.
S	YSTEM CALCULATIONS (FIRE PROTECTION)
Hyd	draulically calculated and pipe schedule fire systems should be designed with a ten percent safety margin for new buildings and additions to existing buildings. Calculations for hydraulic systems should include:
	Flow and pressure at each flowing sprinkler head.
	Flow diagram for a grid system.
ME	ECHANICAL PLANS
	Show all required wall louvers, penetrations and fans.
	Indicate roof-mounted equipment locations.
	Show all mechanical equipment, piping, ductwork (above/below slab) on the mechanical floor and/or roof plan.
	Provide mechanical plans for each floor and the roof. These shall show the ductwork leveuts, set-adula-
	notes, legends, piping schematics, and details necessary to define the system being installed. Indicate air distribution devices and show cfm for all supply, return and exhaust devices.
	Indicate the location of all equipment components required for a complete system.
	Show the smoke ventilation of atriums and pressurization of high-rise stairwells.
	Show condensation drains, primary and secondary, from the unit to the point of discharge.
	Indicate toilet exhaust requirements.
	Show mechanical room layouts at sufficient scale for dimensions and details to be ascertained.
	Show the size of duct runs.
	Indicate controls for fan shutdown: emergency manual and automatic smoke detection.

UCC PLAN REVIEW CHECKLIST GUIDE

Show the location of all UL 555-certified fire dampers, ceiling radiation dampers, smoke dampers, and fire doors.
Show all fire-rated walls (both existing and new) with their ratings on the mechanical plans.
All penetrations of fire-rated construction must be per manufacturer's details.
Room names and numbers for each floor should be on a floor plan for each level.
Provide outside air ventilation rate, fresh air as per the International Mechanical Code (ICC).
Column line notations, if provided on the architectural/structural plans, shall be identified on the mechanical plans.
Provide gas piping layout on the floor plan for each floor. If it is a multi-story building, all gas piping shall be shown per floor. Include pipe sizes, water column, and type of material. Provide a schedule of connected equipment, total BTUH demand, total equivalent length, and most remote gas appliance.

Township of Moon

1000 Beaver Grade Rd, Moon Township, PA 15108 (412) 262-1700

Application for deferred Fire Alarm System, Sprinkler System and engineered structural components submissions:

Property Address Building space			
City, State, Zip			
> Applicant	Phone #		
Email	Cell Phone#		
	City, State, Zip		
> Property owner	Phone #		
Address	City, State, Zip		
> Occupant	Phone		
	City, State, Zip		
> Contractor:	Phone #		
Address	City, State, Zip		
Desire Desired			
Design Professional	Phone #		
Address:	City, State, Zip		
Proposed work:			
The applicant / owner hereby certifies that the statements made herein, and re are true and correct. The applicant / owner shall be responsible for reviewing a applicable codes and ordinances. The applicant / owner grants Moon Township As applicant, I hereby certify that the proposed work is authorized by the owner agent.	officials the right to enter the property for the purpose of inspecting the work.		
> Owner/agents signature	Date		

FUEL GAS PIPELINE TEST AND INSTALLATION

Complete and submit	this form to the Building Inspector after gas line insul	ation and testing is completed
Inspection Address:		
	Street	Permit No.
Subdivision/Project:		
		Lot No.
Builder/Agent Name:		-
		Phone No.
Builder/Agent Address:		
	Street	City State Zip
Installing Firm:		
		Phone No.
Firm's Phone No.:		
Firm's Address:		
	Street	City State Zip
Installed/Tested By:		
_	Name Printed	Phone No.
inspected and pressure test	m, the Installer/Tester by person named herein attest, to the ions from the point of delivery to the outlet of the equipmed by the qualified professional Installer/Tester to determing practices comply with the requirements of the Towns truction Code.	ent shutoff valves have been
Test Pressure Duration:	PSIG	
	, 1.0	Minutes
nstalled/Tested By:	Date:	

RESIDENTIAL FEES (Two Trip Maximum)

Residential Flat Rate, New Construction (Up to 200A)	\$300.00
Residential Flat Rate, New Construction (Over 200A to 400A)	\$400.00
Residential Additions and alterations (Two Trips only)	\$200.00
Services and Subpanels or Temporary Service up to 400A (One trip only)	\$100.00
Each Additional 100A over 400A	\$25.00
Minimum Trip and Reinspection Fee (One trip only)	\$100.00
Hot Tubs (One trip only)	\$100.00
Photo Voltaic Systems up to 5 KW (<i>Two trips only</i>)	\$255.00
Aboveground Swimming Pools (One trip only)	\$150.00
Inground Swimming Pools (Two trips only)	\$230.00
(Swimming Pool panels and/or pool houses are extra, use above fees)	

COMMERCIAL

Services, Subpanels and Temporary Service up to 200A (One trip only)	
Services and Subpanels over 200A and up to 400A	\$200.00
Each Additional 100A over 400A	\$25.00
1-50 Outlet Switches, Receptacles, Lighting, etc. (Rough and Final)	\$200.00
Each Electrical Outlet or Device Over 50	\$0.75
Equipment Up to 10 HP, KVA, KW (Transformers, Motors, HVAC, etc.)	\$35.00
Each Additional HP, KVA, KW, over 10	\$1.00
1-50 Outlets Low Voltage, Fire Alarm, Date, Security, Etc. (Rough and Final)	\$200.00
Each Low Voltage Device Over 50	\$0.75
Illuminated Signs (Each)	\$100.00
Photo Voltaic Cells (Based on the above KW rating and associated equipment)	

Electrical Inspections are available on Monday, Wednesday and Friday.

NOTE: Before inspections can be performed, all application(s) and fees must be submitted, No Exceptions. Please make checks payable to "Township of Moon". To schedule an electrical inspection, please contact John Panek at 724-869-0778 (voicemail) or 412-974-5445 (text).

Rev. Jan. 2020

ELECTRICAL PERMIT APPLICATION

1	Permit Fee Permit No.		ermit No.	
Receipt N	ło.	Permi	Permit Approved By	
Project Address				
	Street	City	State Zip	
Subdivision		Lot No.		
Landowner's Name	Nama	Contact	ikana Na	
Landowner's Address	Name Contact Phone No.		none No.	
Landowner's Address	Street	City	State Zip	
Occupant's Name:				
O a a a a a da A I I I a a a	Name	Contact F	hone No.	
Occupant's Address	Street	City	State Zip	
Contractor's Name				
	Name	Contact F	hone No.	
Contractor's Address	Street	City	State Zip	
Type of Improvement				
Repair/Replace	New Construction Addition	Alteration Other		
Description of work	(wiring, equipment, data, service size, nui	mber switching, lighting, recepta	cles, etc.)	
Current and Former	Lice of Branarty			
Current and Former Single Family		nool Office Other		
Single Family The Applicant/Owner he this application are true and insuring compliance (engineering, etc.) in relative property for the purpose.		n and representations contained in sponsible for reviewing and fully und he Applicant/Owner shall also be reduced to the property of the prope	erstanding all Permit conditions sponsible for any fees incurred o officials the right to enter onto by certify that proposed work is	
The Applicant/Owner he this application are true and insuring compliance (engineering, etc.) in relate property for the purpauthorized by the Owne	Duplex Commercial Schereby certifies that the statements made hereing and correct. The Applicant/Owner shall be reserved to all applicable Codes and Ordinances. The ation to the above proposed project. The Application to the above proposed project.	n and representations contained in sponsible for reviewing and fully und he Applicant/Owner shall also be reducant/Owner grants Moon Townshisting notices. As applicant, I herel	erstanding all Permit conditions sponsible for any fees incurred o officials the right to enter onto by certify that proposed work is	
Single Family The Applicant/Owner he this application are true and insuring compliance (engineering, etc.) in relative property for the purpose.	Duplex Commercial Schereby certifies that the statements made hereing and correct. The Applicant/Owner shall be resert to all applicable Codes and Ordinances. The ation to the above proposed project. The Application of the above proposed project. The Application of the above proposed project.	n and representations contained in sponsible for reviewing and fully und he Applicant/Owner shall also be reducant/Owner grants Moon Townshisting notices. As applicant, I herel	erstanding all Permit conditions sponsible for any fees incurred o officials the right to enter onto by certify that proposed work is	

^{**} All Electrical Permit Applications must be accompanied with a check made payable to "Township of Moon" **