LOGGING PERMIT APPLICATION CHECKLIST

- ☐ Complete and sign application.
- ☐ Logging permit fees, checks made payable to Township of Moon.
- ☐ Complete set of Logging Plans, as per Chapter 196.
- ☐ Timber Harvest Plan, as per Chapter 196.
- ☐ Erosion and Sedimentation Control Plan signed, dated, and approved by Allegheny County Conservation District with a copy of ACCD approval and comments.
- ☐ Performance security as required by 196-6.A.
- ☐ Over Posted Weight Permit approved and Road Financial Security, as required by 196.6.B, Article IV of the Moon Township Code, Over Posted Weight Permit for Township Roads.
- ☐ Liability Insurance Certificates, as per Section 196.9. Insurance in the amount of at least $1,000,000.00 The certificate shall name the Township as an additional insured and the certificate shall state that the Township be notified at least 60 days prior to cancellation of said insurance.
- ☐ Proof of Pennsylvania State Complying Workers Comp Insurance with Moon Township Building Inspector listed as certificate holder.
- ☐ Proof of written timber sales contact between the property owner and logging company.
- ☐ Preliminary slope stability investigation, as per 188-303 of the Moon Township Code.
- ☐ Unstable soils area for logging shall include a Geo-Tech Engineer Report Investigation, as per Section 208-303B of the Moon Township Code.
- ☐ Department of Environmental Protection General Permit #8 required when encroaching a perennial or intermittent stream.
- ☐ Complete, sign and submit the "Permit Agreement" form.

Moon Township, 1000 Beaver Grade Road, Moon Township, PA 15108
PHONE (412) 262-1700 FAX (412) 262-5344
moontwp.com

PENNSYLVANIA WORKERS COMPENSATION INSURANCE COVERAGE INFORMATION FORM

DIRECTIONS: Please complete all sections. All blank spaces must be completed with the requested information and boxes must be checked as they pertain to your status with the Pennsylvania Workman's Compensation Insurance Law. If you are claiming an exemption, this form must be signed in front of a notary public.

The contractor for this building permit, in compliance with ACT 44 of 1993, hereby submits (please check one):

- ❑ Certificate of Insurance (please attach)
- ❑ Certificate of Self-Insurance (please attach)
- ❑ Affidavit of Exemption (must be signed in front of a notary public)

- ➢ Name of Contractor _____
- ➢ Title of Company _____
- ➢ Address _____
- ➢ City _____ State _____ Zip Code _____Phone#_____
- ➢ Contractor or policyholder's federal or state employer identification (EIN) number_____

If a Certificate of Insurance or Self-Insurance has been submitted, please complete the following:

- ➢ Name of Insurer or Self-Insurer _____
- ➢ Address _____
- ➢ City _____ State_____ Zip Code _____Phone# _____
- ➢ Policy No. _____ Coverage Period Ends_____

IF AN EXEMPTION IS BEING CLAIMED, PLEASE COMPLETE AND SIGN IN THE PRESENCE OF A NOTARY PUBLIC:
Basis for exemption is (please check one):

- ❑ The Contractor for this building permit is a sole proprietorship without employees
- ❑ The 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: _____
- ❑ All of the contractor's employees on the project are exemption religious grounds under Section 304.2 of the Workers' Compensation Act. Please explain: _____
  _____
- ❑ Other. Please explain: _____
  _____

Please be aware of the following requirements under the Pennsylvania Workers' Compensation Act:

⇒ The insurer has been notified that the municipality issuing the building permit is to be named a policy certificate holder.
⇒ Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
⇒ The contractor/policyholder will notify the municipality of any change in status, cancellation or expiration of workers' compensation coverage.
⇒ Violation of the Workers' 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 signature on behalf of or as the contractor as stated on this form constitutes my verification that the statements contained here are true, and that I am subject to the penalty relating to unsworn falsifications to Municipal representatives or authorities.

Signature_____Date_____
Name (Please Print)_____
Title_____
Name of Company _____

Subscribed and sworn to before me this

_____day of_____ seal

_____
(Signature of Notary Public)

My Commission expires: _____

Township of Moon Permit Agreement

In consideration of the issuance by the Township of Moon (the "Township") of a Building Permit, Zoning Permit and other permits for the property located at address,

_____and to the undersigned property owner(s) or the agent (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 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's Signature _____ Date _____

Print Name _____

Owner's Signature _____ Date _____

Print Name _____

Address of permitted work_____

Permit Number_____ Date Issued_____

Application Fee: $500.00 **Engineering Escrow:** $3,000.00

APPLICATION FOR A LOGGING PERMIT

TOWNSHIP OF MOON, 1000 BEAVER GRADE ROAD, MOON TOWNSHIP, PA 15108
PHONE (412) 262-1700 FAX (412) 262-534

Address of Property Affected: _____

Applicant: _____

Address: _____

Phone: _____ Fax: _____

Logging Company: _____

Company Representative: _____

Address: _____

Phone: _____ Fax: _____

Forester who prepared the Timber Harvest Plan: _____

Address: _____

Phone: _____ Fax: _____

Property Owner: _____

Address: _____

Phone: _____ Fax: _____

Hauling Contractor: _____

Address: _____

Phone: _____ Fax: _____

The Applicant/Owner/Logging Contractor/Forester hereby certifies that the statements made herein and representations contained in all accompanying matter part of this application are true and correct. The Applicant/ Owner/Logging Contractor/Forester shall be responsible for reviewing and fully understanding all Permit conditions and insuring compliance to all applicable Codes and Ordinances. The Applicant/Owner/Logging Contractor/Forester shall be responsible for any fees incurred (Engineering etc.) in relation to the above proposed project. The Applicant/ Owner/Logging Contractor/Forester grants Moon Township Officials the right to enter onto the property for the propose of 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 authorized agent.

_____ _____
Applicant Date

_____ _____
Authorized Agent/Logging Contractor Date

_____ _____
Property Owner: Date

_____ _____
Owner's Professional Forester Date

APPLICATION FOR LOGGING PERMIT

OFFICE USE ONLY

Permit Fee	_____	Receipt No. _____
Engineering Escrow	_____	Receipt No. _____
Date Permit Issued	_____	Initials _____
Bond Amount	_____	Receipt No. _____
Date Bond Released	_____	Initials _____

_____ _____
Township Engineer Date

_____ _____
Township Forester Date

Inspection Comments:

_____ Condition of property prior to logging _____
Date _____
_____
_____

Cutting Block Inspections: _____
_____
_____
_____

_____ Condition of property at completion of logging _____
Date _____
_____
_____

Permit Refused _____

Reason _____
_____

log.app

PERMIT #: _____

MOON TOWNSHIP
OVER-POSTED WEIGHT PERMIT

COMPLETE AND RETURN TO THE ROAD MASTER

TOWNSHIP STREET NAME: _____ DATE: _____

APPLICANT/COMPANY: _____

APPLICANT/PERSON: _____

APPLICANT/COMPANY ADDRESS: _____

POST OFFICE: _____ ZIP: _____ PHONE #: _____

STREET ADDRESS OF WORK: _____

DESCRIBE THE LENGTH OF ROAD TO BE USED: _____ MILES

CONDITION OF ROAD: _____

BOND AMOUNT TO BE HELD BY TOWNSHIP: $_____

DATE WHEN OVER-POSTED WEIGHT TRAFFIC ON TOWNSHIP ROAD WILL STOP: _____

NUMBER OF OVER-POSTED WEIGHT VEHICLES: _____

IDENTIFY VEHICLES: _____

WEIGHT OF VEHICLES: _____ TONS

DESCRIBE TRAFFIC CONTROL MEASURES (I.E. PENNDOT PUBLICATION 203): _____

_____

THE APPLICANT MUST NOTIFY THE ROAD MASTER AND POLICE DEPARTMENT AT LEAST TWENTY-FOUR (24) HOURS BEFORE OVER-POSTED WEIGHT TRAFFIC BEGINS.

I HAVE READ AND UNDERSTAND MOON TOWNSHIP ORDINANCE #357 AND WILL COMPLY WITH THE REQUIREMENTS OF SAID ORDINANCE.

SIGNATURE OF APPLICANT: _____ DATE: _____

SIGNATURE OF ROAD MASTER: _____ DATE: _____

Upon approval, two copies of the permit shall be returned to the applicant. One copy of the approved permit must be kept with the over-posted weight vehicles. Permit expires 30 days from issuance date.

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