

CAMBRIA TOWNSHIP COMPLIANCE PERMIT APPLICATION

STEP 1

Location of proposed building/addition _____

A. TYPE OF IMPROVEMENT

New Building

Addition

Repair/Replace

Demolition

Moving/Relocation

Foundation Only

Other

B. OWNERSHIP

Private

Public

D. PROPOSED USE-MOST RECENT USE

<p>RESIDENTIAL</p> <p><input type="checkbox"/> One Family</p> <p><input type="checkbox"/> Two or more family</p> <p><input type="checkbox"/> No. of Units _____</p> <p><input type="checkbox"/> Transient Hotel, Motel</p> <p><input type="checkbox"/> No. of Units _____</p> <p><input type="checkbox"/> Garage</p> <p><input type="checkbox"/> Carport</p> <p><input type="checkbox"/> Swimming Pool</p> <p><input type="checkbox"/> Other</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>NON-RESIDENTIAL</p> <p><input type="checkbox"/> Amusement/Recreation</p> <p><input type="checkbox"/> Church/Religious</p> <p><input type="checkbox"/> Industrial</p> <p><input type="checkbox"/> Parking Garage</p> <p><input type="checkbox"/> Service Station/Repair</p> <p><input type="checkbox"/> Hospital/Institution</p> <p><input type="checkbox"/> Office/Bank/Prof.</p> <p><input type="checkbox"/> Public Utility</p> <p><input type="checkbox"/> School/Library</p> <p><input type="checkbox"/> Store/Mercantile</p> <p><input type="checkbox"/> Tanks/Towers</p> <p><input type="checkbox"/> Sign</p>
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C. TOTAL COST OF IMPROVEMENT: \$ _____

NON-RESIDENTIAL: Describe in detail proposed used of building: Food Processing, Plant, Machine Shop, Secondary School, College, Parochial School, Parking Garage for Dept. Store, Rental Office Building Office or Industrial Plant. If use of existing building is being changed, enter proposed use. _____

E. PRINCIPAL TYPE OF FRAME

Masonry (wall bearing)

Wood Frame

Structural Steel

Re-enforced Concrete

Other-Specify _____

G. TYPE OF SEWAGE

Public or Private

Individual (Septic)

J. DIMENTIONS

No. of Stories _____

Sq. Ft. --Floor _____

Sq. Ft. --Land _____

F. PRINCIPE TYPE OF HEATING

Oil

Gas

Electric

Coal

H. TYPE OF WATER

Public or Private

Individual (Well)

K. OFF ST. PARKING

Enclosed

Outdoors

I. TYPE OF MECHANICAL

Air Conditioning

Elevator

L. RESIDENTIAL

No. of Bedrooms _____

Full Bath _____

Partial Bath _____

OWNER (print)	ADDRESS	PHONE NO.
CONTRACTOR (print)	ADDRESS	PHONE NO.
ARCHITECT (print)	ADDRESS	PHONE NO.

SIGNATURE OF APPLICANT _____ DATE _____

DO NOT WRITE IN THIS SPACE

APPROVED	PERMIT FEE	DATE ISSUED	PERMIT NO.
	\$ _____		

PLEASE SEE REVERSE SIDE FOR FURTHER INFORMATION

1-2013

WORKERS' COMPENSATION INSURANCE INFORMATION

A. The Applicant is:

A Contractor within the meaning of the Pennsylvania Workers' Compensation Law.

YES NO

If the answer is yes, complete Sections B and C below as appropriate or attach a copy of Certificate of Insurance Form from Contractors Insurance Company.

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for workers' compensation
(Attach Certificate)

Name of Workers' Compensation Policy No. _____
(Attach Certificate)

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from workers' compensation insurance.

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of the Pennsylvania Workers' 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 permit unless contractor provides proof of insurance to the Township.

_____ Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this _____ day of _____, 20____

(Signature of Notary Public)

My Commission expires: _____

Signature of Applicant:

Address

**CAMBRIA TOWNSHIP
COMPLIANCE
PERMIT**

PROPERTY OWNER NAME: _____

LOT NUMBER _____ #911 ADDRESS _____

DESCRIPTION OF CONSTRUCTION _____

FAX TO: Brian Rearick, MDIA Field Inspector
1-800-682-6342 (Phone)

ADDITIONAL COMMENTS:

- _____ Set Back Requirements Established
- _____ Land Development/Subdivision Ordinance
- _____ Stormwater Management Ordinance
- _____ Cam. County Conservation District (Erosion and Sedimentation)
- _____ Flood Plain Management Ordinance
- _____ Road Occupancy/Driveway Permit
- _____ Contractors License/Permit

Note: "Certificate of Occupancy" will be issued by the Cambria Township Zoning/Compliance Permit Officer (for commercial buildings) after receipt of "Certificate of Occupancy" from the Building Codes Enforcement Officer

Cambria Township Compliance Officer
Terry Shulsky
404 Forest Drive
Ebensburg, PA 15931
(814-472-7675)

Date of Approval



FOR YOUR INFORMATION ONLY-PLEASE KEEP

***SEND ALL COMPLIANCE APPLICATION PERMITS TO:**

Terry Shulsky
404 Forest Drive
Ebensburg, PA 15931
(814) 472-7675 (After 5:00 p.m.)

STEP 1

***BUILDING PERMIT INFORMATION:**

Middle Department Inspection Agency (MDIA)
Brian Rearick, Field Inspector
(800) 682-6342

STEP 2

***FOR ALL INFORMATION AND APPLICATIONS PERTAINING TO PERK TESTS CALL:**

The EADS Group
Mark Lazzari
227 Franklin Street, Suite 300
Johnstown, PA 15901
(814) 535-5388

In order to determine if your construction is applicable to the Land Development and Subdivision Ordinance or the Storm-water Management Ordinance, or if you require a Special Exception or Variance, you must contact the Cambria Township Planning Commission, Zoning/Hearing Board and/or the Township Engineer.

CAMBRIA TOWNSHIP PLANNING COMMISSION: Meets the 2nd Tuesday of each month at 5:30 pm. in the Cambria Township Conference Room. Dennis Simmers (814) 748-7961 ext. 15.

CAMBRIA TOWNSHIP ZONING/HEARING BOARD: Meets the 1st. Tuesday of Each month at 7:00 p.m. in the Cambria Township Conference Room. Norberta Marshall (814) 472-7093

CAMBRIA TOWNSHIP ENGINEERS: The EADS Group, 1126 Eighth Avenue, Altoona, PA 16602, (814) 944-5035

TO OBTAIN #911 ADDRESS: 911 Center, 401 Candlelite Drive, Ebensburg, PA 15931, (814) 472-2050

ALL ROADS OR DRIVEWAYS coming onto a Township road must have Road Occupancy Permit.
Applications are available at the Cambria Township Municipal Building.

CAMBRIA COUNTY INDUSTRIAL PARK businesses entering onto the Cam. Co. Industrial Park Road must receive a Road Occupancy Permit from Cam. Twp. A minimum of 18" smoothwall pipe must be installed. An open ditch inspected will be conducted by the Supervisors before completing the job. Call (814) 472-8810 to set up an appointment for the inspection.

If placing a sign on the State Right of Way Contact : Penndot, 1620 N. Juniata St. Hollidaysburg, PA 16648. Mr. Barry Clancy, (814) 696-7211.

YOU MUST ATTACH COPIES OF THE FOLLOWING INFORMATION (IF APPLICABLE) TO THE COMPLIANCE PERMIT FOR APPROVAL.

- Proof (Copy) of Sewage Permits or Sewage Connection Permit if Public Sewage System
- Proof (Copy) of Workers' Compensation from Contractor
- Proof (Copy) of #911 addressing
- Proof (Copy) Road Occupancy Permit (Township or Penndot)