



TOWNSHIP OF

*Hampton*

## **RESIDENTIAL DECK PERMIT APPLICATION** **For decks without a roof**

*If the deck includes an attached roof please complete the Residential Building Permit Application for New Construction & Additions*

### **Please submit the following items with your completed application:**

- Two (2) sets of plans in detail
  - Plans must consist of front, side and rear views with a sectional view in detail.
  - **Plans MUST follow the guidelines in the 2018 International Residential Code, as adopted by the PA UCC**
  - **Decks supporting additional weights (i.e. free-standing roofs/pergolas, hot tubs, or storage buildings) must have plans designed and stamped by a registered designed professional (PA certified architect or engineer)**
- Copy of official stamped property survey
  - Draw the proposed location of the deck on the survey and mark the distances from the proposed location to the various property lines.
  - Show any septic systems or on-lot storm water controls.
- Copy of workers compensation insurance certificate(s) - (if applicable, see page 9)
- Payment is due upon issuance of the permit. Please bring payment when you pick up the permit. The permit will not be released until payment has been received. We accept check or cash. All checks are made payable to: **“Township of Hampton”**
- Please turn in a completed application filled out in blue or black ink

### **PLEASE BE AWARE:**

The fee for an electrical permit and associated inspection(s) is not included in the building permit fee. If an electrical inspection is required, please contact the electrical inspector directly (see pg. 3) and he will issue the permit and collect the fee on site during the inspection.

There will be an additional charge for re-inspections that exceed two or more of the allotted number of inspections listed on the permit. No Certificate of Occupancy will be issued until such time as the additional inspection fees are paid in full.

If you plan to have a dumpster on site, please submit a Temporary Use Permit application.

**RESIDENTIAL PERMIT APPLICATION FEES FOR DECKS**

**PAYMENT IS DUE UPON ISSUANCE OF THE PERMIT. PLEASE BRING PAYMENT WHEN YOU PICK UP THE PERMIT. THE PERMIT WILL NOT BE RELEASED UNTIL PAYMENT HAS BEEN RECEIVED.**

Deck Permit Fee	\$0.25 per square foot of <b>GFA*</b>
+	
Base Cost of Building Permit	\$50.00
+	
PA State Administration Fee	\$4.50

**PLEASE BE AWARE:**

\***GFA** (Gross floor area) calculation is based on the **TOTAL** square footage of the deck plus stairs and landings.

*We accept check or cash.*

*Please submit one check for the total amount due.*

*All checks are made payable to: “Township of Hampton”*

*Thank you!*



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## **PROCEDURE FOR SCHEDULING INSPECTIONS**

We advise a minimum of 48 hours advance notice when scheduling an inspection

The Township of Hampton currently employs the third-party plan review agency Code.sys for all UCC plan review and inspections. The Township Building Inspector through Code.sys is Kevin Karman. Please contact him directly for all UCC Building Permit inspections.

**Kevin Karman: 412-491-6868**

For all electrical inspections please contact Gene Meaner with Code.sys.

**Gene Meaner: 412-821-0337 x 39**

**PLEASE have the following information ready before calling the Building Inspector:**

- ✓ Permit Number
- ✓ Site Address
- ✓ Contractor's name and phone number
- ✓ Home/business owner's name and phone number
- ✓ Type of inspection needed
- ✓ Type of construction

If you do not have the above information ready, an inspection **CANNOT** be scheduled.

*Please note: There will be an additional charge for re-inspections that exceed two or more of the allotted number of inspections that are listed on the building permit. No Certificate of Occupancy will be issued until such time as the additional inspection fees are paid in full.*



For Township Use Only:

Permit #: \_\_\_\_\_

Approved Yes \_\_\_ No \_\_\_

Date \_\_\_\_\_

## RESIDENTIAL BUILDING PERMIT APPLICATION FOR DECKS

### LOCATION OF PROPOSED WORK OR IMPROVEMENT

**Complete Site Address:** \_\_\_\_\_

Tax Parcel# \_\_\_\_\_ Lot# \_\_\_\_\_ Zoning: \_\_\_\_\_

**Owner:** \_\_\_\_\_ Phone# \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**Contractor:** \_\_\_\_\_ Phone# \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ PA# \_\_\_\_\_

E-Mail: \_\_\_\_\_

**All correspondence for this application/permit will be sent to the Contact Person listed below.  
It will be the contact's responsibility to forward all documentation to any other interested parties  
(i.e. property owners or contractors)**

**Contact Person:** \_\_\_\_\_ Phone \_\_\_\_\_ email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_



**TYPE OF WORK OR IMPROVEMENT (*Check one*)**

DECK                  ATTACHED \_\_\_\_\_                  DETACHED \_\_\_\_\_

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**BUILDING DIMENSIONS AND SETBACKS**

Proposed Building Area: \_\_\_\_\_ sq. ft.                  Number of Stories: \_\_\_\_\_

Existing Building area: \_\_\_\_\_ sq. ft.                  Height of Structure Above Grade: \_\_\_\_\_

Total Building Area: \_\_\_\_\_ sq. ft.

<b>DIMENSIONS</b> _____ x _____ Length    Width
--

**Setbacks: (This section MUST be filled in completely for the application to be accepted)**

Distance from FRONT of structure to street right-of-way \_\_\_\_\_ ft.

Distance from structure to REAR property line \_\_\_\_\_ ft.

Distance from RIGHT side of structure to RIGHT property line \_\_\_\_\_ ft.

Distance from LEFT side of structure to LEFT property line \_\_\_\_\_ ft.

*\* Please mark setback values on the submitted survey as well \**

**Is there a watercourse or wetlands on the property? \_\_\_\_\_ If so, please show on survey.  
(Limited disturbance allowed, please refer to Ordinance No. 780, Section 4.5 for specifics)**

**ESTIMATED COST OF CONSTRUCTION: \$ \_\_\_\_\_**

The applicant certifies that all information on this application is correct and the work will be completed in accordance with the “approved” construction documents and **PA ACT 45 (UNIFORM CONSTRUCTION CODE)** and any additional approved building code requirements adopted by the Municipality. The property owner and applicant assumes the responsibility of locating all property lines, setback lines, easements, right of way, flood areas. Issuance of a permit and approval of construction documents shall not be construed as authority to violate, cancel or set aside any provisions of the codes or ordinances of the Municipality or any other governing body. The applicant certifies he/she understands all the applicable codes, ordinances and regulations.

Application for a permit shall be made by the owner or lessee of the building or structure, or agent of either, or by the *registered design professional* employed in connection with the proposed work.

\_\_\_\_\_  
Signature of Owner or Authorized Agent

\$0.25 per square foot	\$ _____
(\$0.25 x Total GFA)	
Base Cost of Building Permit:	\$ <u>50.00</u>
<u>PA State Administration fee:</u>	\$ <u>4.50</u>

Total Amount Due: \$ \_\_\_\_\_

***Township Use Only:***

Received By: \_\_\_\_\_

Date : \_\_\_\_\_

Check#: \_\_\_\_\_

Cash: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

I/We being the owner and/or contractor and/or agent of the owner and/or agent of the contractor by the execution of this “Application for Residential Building” do represent that I/we the undersigned SHALL BE PERSONALLY RESPONSIBLE AND DO HEREBY PERSONALLY ASSURE that the Building Inspector of the Township of Hampton or his designee shall be permitted access onto the premises under construction at all reasonable times as set forth in the Building Code of the Township of Hampton. I/We do further understand, acknowledge and intend that such foregoing representations are intended to induce the Township of Hampton to issue said residential building permit.

\_\_\_\_\_  
OWNER

\_\_\_\_\_  
OWNER

\_\_\_\_\_  
TOWNSHIP OF HAMPTON

\_\_\_\_\_  
CONTRACTOR

\_\_\_\_\_  
AGENT FOR OWNER

\_\_\_\_\_  
AGENT FOR CONTRACTOR



3101 McCully Road, Allison Park, Pennsylvania 15101 ♦ Area Code 412-486-0400  
permitting@hampton-pa.org  
Fax: 412-486-5019

TOWNSHIP OF HAMPTON  
RELEASE FORM

*This page must be signed and dated by the property owners.*

I / We, \_\_\_\_\_,

being the owner or owners of the property listed below, located at \_\_\_\_\_

\_\_\_\_\_, agree to *HOLD HARMLESS* the Township of Hampton of any and all legal responsibilities in the removal of fence, hedge, post, mailbox, sign, wall, tree or shrub which has been placed over the road right-of-way easement for utilities, should it ever become necessary to remove same for maintenance purposes. In addition, I/We recognize that the installation of any structure within an easement or right-of-way (ROW) is restricted by the Township’s Zoning Ordinance. If any easements and/or right-of-ways exist that were not included on the submitted survey/plan, I/We assume all responsibilities for compliance with Township Zoning Ordinance restrictions regarding placement of any structure in these areas.

Further, this **RELEASE FORM** is to be made a part of, and recorded with, the building permit issued on the above property.

\_\_\_\_\_  
Owner Date

\_\_\_\_\_  
Owner Date





TOWNSHIP OF  
*Hampton*

**Addendum to Building Permit**

PA Act 44 requires all contractors with employees to provide proof of current Workers Compensation Insurance. If you are a contractor with employees, please check the appropriate box in Section I, fill out the information in Section II and attach a copy of your Certificate of Insurance. If you are claiming an exemption to this law, please check the "Affidavit of Exemption" box in Section I, check the appropriate box in Section III, and have the form notarized in the box on page 10 of this application.

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

- Certificate of Insurance (please attach)
- Certificate of Self-Insurance (please attach)
- Affidavit of Exemption

II. 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 \_\_\_\_\_

Policy No. \_\_\_\_\_ Coverage Period Ends \_\_\_\_\_

Name of Contractor / Policy Holder \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Contractor / Policyholder's federal or state employer identification number (EIN)

1. This policy provides coverage for the requirements of the Workers' Compensation Act, the Occupational Disease Act, and, where applicable, the federal Longshore and Harbor Workers' Compensation Act.
2. The insurer has been notified that the municipality issuing the building permit is to be named a policy certificate holder.
3. Any subcontractors used on this project will be required to carry their own workers' compensation coverage.
4. The contractor / policyholder will notify the municipality of any change in status, cancellation or expiration of workers' compensation coverage.
5. Violation of the Workers' Compensation Act or the terms of this permit will subject the contractor / policyholder to a stop-work order and other fines and penalties as provided by law.

III. If an exemption is being claimed, please complete the following and sign in the presence of a notary public:

Basis for exemption (check one):

- Applicant is an individual who owns the property

- Contractor / Applicant is a sole proprietorship without employees
- Contractor / Applicant 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:  
\_\_\_\_\_  
\_\_\_\_\_
- The entire contractor / applicant’s employees on the project are exempt on religious grounds under Section 304.2 of the Workers’ Compensation Act. Please explain:  
\_\_\_\_\_  
\_\_\_\_\_
- Other. Please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Name of Applicant \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Applicant’s federal or state employer identification number (EIN) \_\_\_\_\_

Any subcontractors used on this project will be required to carry their own workers’ compensation coverage.  
 The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.  
 Violation of the Worker’s Compensation Act or the terms of this permit will subject the applicant to a stop-work order and other fines and penalties provided by law.

My signature on behalf of or as the contractor / applicant for this building permit constitutes my verification that the statements contained here are true, and that I am subject to the penalty of 18 Pa. C.S.A. §4904 relating to unsworn falsifications to authorities.

Subscribed and sworn before me this day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
*(Signature of Notary Public)*

Commission expires: \_\_\_\_\_  
 (Seal)

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Name (Please Print)

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Name of Company



*LIST ALL MATERIALS FOR DECK/PATIO AND WHERE THEY WILL BE USED*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_
16. \_\_\_\_\_
17. \_\_\_\_\_
18. \_\_\_\_\_
19. \_\_\_\_\_
20. \_\_\_\_\_
21. \_\_\_\_\_
22. \_\_\_\_\_
23. \_\_\_\_\_
24. \_\_\_\_\_
25. \_\_\_\_\_

## **Please Be Aware:**

**\* If the construction of your proposed deck is not in conformance with the prescriptive methods in the 2018 IRC, the plans must be designed and stamped by a registered designed professional (PA certified architect or engineer)**

**\* Decks supporting additional weights (i.e. free-standing roofs/ pergolas, hot tubs, or storage buildings) must have plans designed and stamped by a registered designed professional (PA certified architect or engineer)**

## **STANDARD DECK SPECIFICATIONS**

- #2 or better grade 2 x 10 Floor Joist 16" on center, double 2 x 10 beam notched into 6 x 6 posts.
- 4"x4" post setting on top of 18" x 18" x 8" thick concrete footer minimum – for up to 8' high
- 6" x 6" posts setting on top of 18" x 18" x 1' thick concrete footer minimum – for up to 14'
- Footings must be at least a minimum of eighteen (18) inches in diameter, depending on the deck size and soil.
- At least ten (10) inches of mixed concrete in the bottom of the holes or ditch. (*Under the posts*)
- Footer must be at least thirty-six (36) inches below finish grade. Unless freestanding deck, in which only needs to go down 12"
- Headers to be notched into posts and bolted with 1/2" bolts
- With 2 x 4 rails top and bottom 2 x 2 pickets are to be no more than four (4) inches apart.
- 5/4 decking or 2 x 6 on top of rails or composite.
- Post to be bolted to beam with 1/2" x 6" galvanized through bolts (nuts and washers on both sides). Carriage bolts are NOT an approved fastener.
- #1 premium grade 5/4 x 6 Decking minimum.
- Railing system must be able to withstand 200 pounds of outward force and be at least thirty-six (36) inches in height.
- 4 x 4's in railing system must be bolted or lagged with 2 pc. 3/8" x 3" minimum.
- Ledger board secured to house or structure using 1/2" x 6" bolts or lag screws minimum, sixteen (16) inches on center and/or an approved fastener (i.e. ledgerlocks).

## **TOWNSHIP OF HAMPTON**