



Borough of Dallastown  
**COMMERCIAL**

## BUILDING PERMIT APPLICATION

Dallastown Borough

175 East Broad Street, Dallastown PA 17313

PHONE: 717-244-6626 • FAX: 717-244-1076 • [www.dallastownboro.com](http://www.dallastownboro.com)

DATE RECEIVED: \_\_\_\_\_

BP #: \_\_\_\_\_ DTB FEES \$ \_\_\_\_\_

3<sup>RD</sup> PARTY FEES \$ \_\_\_\_\_

TOTAL FEES \$ \_\_\_\_\_

DATE ISSUED: \_\_\_\_\_

BOROUGH USE ONLY

### OWNER INFO

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### CONTRACTOR INFO

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email: \_\_\_\_\_

PROJECT ADDRESS: \_\_\_\_\_ TOTAL LOT AREA: \_\_\_\_\_

EXIST IMPERVIOUS COVER SF \_\_\_\_\_ (SEE ATTACHED ZONING GUIDELINES)

NEW IMPERVIOUS COVER SF \_\_\_\_\_ TOTAL LOT COVER (%) \_\_\_\_\_

### DESCRIPTION OF PROJECT (PROVIDE DRAWING OF LOT WITH EXISTING AND ADDED COVER)

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COST of PROJECT: \_\_\_\_\_ FEES: \$49.50 (UP TO \$1K) ADD \$2 PER THOUSAND OVER \$1K + 3<sup>RD</sup> PARTY FEES

APPLICANT SIGNATURE: \_\_\_\_\_

APPLICANT CONTACT INFO: PHONE / EMAIL: \_\_\_\_\_

§ 90-3 Permit required. It shall be unlawful for any person, firm, association or corporation to erect, construct, enlarge, alter, repair, move, remove or demolish any building or structure within the limits of the Borough of Dallastown, York County, Pennsylvania, unless a permit therefor shall first be secured as hereinafter provided.

The above signed applicant hereby makes application for a building permit in accordance with PA UCC Section 403.62a and all applicable ordinances of Dallastown Borough and hereby certifies, under penalties of perjury, that all facts herein are true and correct. The permit will become invalid if authorized work does not commence within 180 days from the permit issuance date. The applicant also understands and acknowledges that all plan review fees must be paid regardless of whether the applicant proceeds with the project. Effective January 2, 2024 (R2024-03) –The Borough reserves the right to collect a fee up to \$500 as a deposit at the time of the application.

PLOT PLAN DRAWING

REV - 2026

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

## APPLICATION FOR PLAN REVIEW

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## APPLICATION FOR COMMERCIAL BUILDING PERMIT

Municipal Tracking #

Permit #

Plan Review #

FAILURE TO FILL OUT THE PERMIT APPLICATION COMPLETELY MAY RESULT IN DELAYS OR REJECTION OF APPLICATION

## PROPERTY ADDRESS

Street Address:	Parcel	Zoning
Subdivision:	Lot	Type
Municipality	County	

## OWNER ADDRESS

Last name or Business	First name	Phone
		Fax
Address	City	State
		Zip

## TYPE OF APPLICATION

<input type="checkbox"/> Building	<input type="checkbox"/> Electrical	<input type="checkbox"/> Accessibility	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Other
<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Fire Suppression	<input type="checkbox"/> Occupancy	

## Type of Work (Check all that apply)

- New Construction
- Additional construction
- Alteration/Structural/Egress Change
- Repair/Renovation  IBC  IEBC (1 2 3)
- Foundation Permit
- Change of Use/Occupancy
- Initial Certificate of Occupancy

## Type of Construction (Check all that apply)

- IA  IV
- 1B
- IIA  VB
- IIB  VA
- IIIA  Separate Use
- IIIB  Non-separated Use

## Previous L&amp;I Certificate #(s)

PROPOSED CODE/YEAR  
FOR THIS PROJECT

## Use Group (List all)

<input type="checkbox"/> A1	<input type="checkbox"/> H1	<input type="checkbox"/> R1
<input type="checkbox"/> A2	<input type="checkbox"/> H2	<input type="checkbox"/> R2
<input type="checkbox"/> A3	<input type="checkbox"/> H3	<input type="checkbox"/> R3
<input type="checkbox"/> A4	<input type="checkbox"/> H4	<input type="checkbox"/> R4
<input type="checkbox"/> A5	<input type="checkbox"/> H5	<input type="checkbox"/> S1
<input type="checkbox"/> B	<input type="checkbox"/> I1	<input type="checkbox"/> S2
<input type="checkbox"/> E	<input type="checkbox"/> I2	
<input type="checkbox"/> F1	<input type="checkbox"/> I3	<input type="checkbox"/> U
<input type="checkbox"/> F2	<input type="checkbox"/> I4	
	<input type="checkbox"/> M	

## Fire Separation

- Single Use
- Separated Uses
- Non-separated Mixed Use
- Incidental Use Main Use \_\_\_\_\_

## Fire Suppression (List all)

Type:  
 Wet (Water)  
# \_\_\_\_\_ Standard \_\_\_\_\_

Dry (Water)  
# \_\_\_\_\_ Standard \_\_\_\_\_

Chemical  
# \_\_\_\_\_ Standard \_\_\_\_\_

Type \_\_\_\_\_

Start Date

Finish Date

Total Value of All Work

**Description of proposed project:**

**Electrical Permit Information**

**Electrical Service Size**

\_\_\_\_\_ Amps Power Company Name \_\_\_\_\_

\_\_\_\_\_ Volts Power Company Job # \_\_\_\_\_

\_\_\_\_\_ Ø

General outlets: \_\_\_\_\_ 120 volt \_\_\_\_\_ 240 volt

Circuits: \_\_\_\_\_ 2 wire \_\_\_\_\_ 3 wire \_\_\_\_\_ 4 wire

Device Name	Watts	Amps	#	Device Name	Watts	Amps	#
Start Date	Finish Date	Value of work					

## Plumbing Permit Information

<b>Water Service Size</b> Water Company Name _____ In. Dia. _____ Water Company Job # _____							
_____ Pressure at main (PSI) _____ Supply at main (GPM) Supply branches: _____ Hot _____ Cold Total Demand: GPM _____ PSI _____							
<b>Fixture Name</b>	<b>GPM</b>	<b>PSI</b>	<b>#</b>	<b>Fixture Name</b>	<b>GPM</b>	<b>PSI</b>	<b>#</b>
<input type="checkbox"/> <b>Sewer</b> Sewer Company Name _____ Job # _____ Size of Main _____ in.      Size of Lateral _____ in.      Capacity of System _____ dfu							
<input type="checkbox"/> <b>Septic</b> S.E.O. Name _____ Job # _____ Size of Tank _____ gal.      Size of Lateral _____ in.      Capacity of System _____ dfu.							
Size of Building Drain _____ in.      Total Calculated Outflow _____ dfu							
<b>Fixture Name</b>	<b>Drain (in)</b>	<b>Vent(in)</b>	<b>DFU</b>	<b>Fixture Name</b>	<b>Drain (in)</b>	<b>Vent(in)</b>	<b>DFU</b>
Grease Trap _____ gal.      Garbage Disposal # _____      Air Admittance Valve # _____      Back Flow Preventer # _____							
Start Date	Finish Date	Value of Plumbing Work					

## Mechanical Permit Information

Fuel Gas? <input type="checkbox"/> yes <input type="checkbox"/> no	Public? <input type="checkbox"/> yes <input type="checkbox"/> no	Piping Type(s) _____
Oil? <input type="checkbox"/> yes <input type="checkbox"/> no	Tank Capacity? _____	Underground? <input type="checkbox"/> yes <input type="checkbox"/> no
Electric? <input type="checkbox"/> yes <input type="checkbox"/> no	Total KW _____	
Duct Detectors? <input type="checkbox"/> yes <input type="checkbox"/> no		Number of Zones? _____ Type? _____
Kitchen Hood? <input type="checkbox"/> yes <input type="checkbox"/> no		Fire Suppression System? <input type="checkbox"/> yes <input type="checkbox"/> no Type? _____
Hazardous Exhaust? <input type="checkbox"/> yes <input type="checkbox"/> no		Fire Suppression System <input type="checkbox"/> yes <input type="checkbox"/> no Type? _____
Fire Dampers? <input type="checkbox"/> yes <input type="checkbox"/> no		Smoke Dampers <input type="checkbox"/> yes <input type="checkbox"/> no
Smoke Control System? <input type="checkbox"/> yes <input type="checkbox"/> no		Governing Code Section(s) _____
Regular Exhaust Fans? <input type="checkbox"/> yes <input type="checkbox"/> no		Number? _____ Duct Type(s) _____
Fireplace? <input type="checkbox"/> yes <input type="checkbox"/> no	Number? _____	
Gas? <input type="checkbox"/> yes <input type="checkbox"/> no	Piping Type _____	Vent Type _____
Masonry? <input type="checkbox"/> yes <input type="checkbox"/> no	Material Type _____	Chimney Type _____
Electric? <input type="checkbox"/> yes <input type="checkbox"/> no	Kw? _____	
Start Date	Finish Date	Value of work

## Fire Alarm Permit Information

Requiring Code Section _____		
Type(s) of Wiring _____		
Battery Back Up <input type="checkbox"/> yes <input type="checkbox"/> no      Generator <input type="checkbox"/> yes <input type="checkbox"/> no		
Number of Zones _____		
Type(s) of System(s) _____		
Type(s) of Detectors(s) _____ Smoke, heat, infrared, ultraviolet, etc.		
Types of Special Applications _____		
Types of Initiating Tests _____		
Start Date	Finish Date	Value of Work

## Fire Suppression System Permit

Requiring Code Section(s) _____		Number of Systems _____	
Design: NFPA 13 <input type="checkbox"/> yes <input type="checkbox"/> no		Wet System <input type="checkbox"/> yes <input type="checkbox"/> no	Number _____
NFPA 13R <input type="checkbox"/> yes <input type="checkbox"/> no		Dry System <input type="checkbox"/> yes <input type="checkbox"/> no	Number _____
System Type	Piping Type	System Design Pressure (PSI)	System Design Capacity (GPM)
Alternate Systems <input type="checkbox"/> yes <input type="checkbox"/> no		Pre-action <input type="checkbox"/> yes <input type="checkbox"/> no	Number of Systems _____
System Type	Chemical	Capacity	Reference Standard(s)
Start Date	Finish Date	Value of Work	

## PROPOSED DEFERRED SUBMITTALS

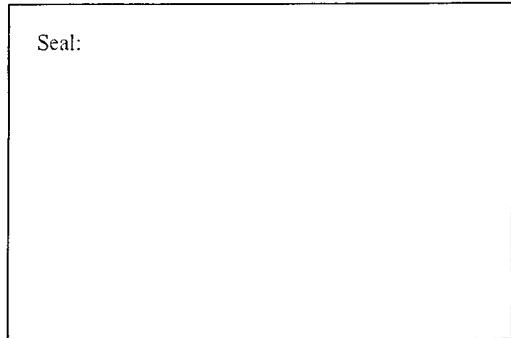
Foundation Permit      ETA      /      /  
 Structural Steel      ETA      /      /  
 Fire Suppression      ETA      /      /  
 Fire Alarm      ETA      /      /  
 Roof Truss      ETA      /      /  
 Floor Truss      ETA      /      /  
 Spec Books      ETA      /      /

## Design Professional in Responsible Charge

Name: \_\_\_\_\_

Registration Number \_\_\_\_\_

Seal:



## FAILURE TO FILL OUT THE PERMIT APPLICATION COMPLETELY MAY RESULT IN DELAYS OR REJECTION OF APPLICATION

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 delegated 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.

Applicant \_\_\_\_\_ Date \_\_\_\_\_ Phone \_\_\_\_\_

Fax \_\_\_\_\_ Email \_\_\_\_\_ Mobile \_\_\_\_\_

## PERSONNEL

### General Contractor

General Contractor \_\_\_\_\_

Contact Person \_\_\_\_\_ Are there other prime contractors?  yes  no If yes, list separately.

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Architect**

Architect in Responsible Charge \_\_\_\_\_

Lead Architect \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Structural Engineer**

Firm \_\_\_\_\_

Lead Engineer \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Electrical Engineer**

Firm \_\_\_\_\_

Lead Engineer \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Mechanical Engineer**

Architect in Responsible Charge \_\_\_\_\_

Lead Architect \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Plumbing Engineer**

Firm \_\_\_\_\_

Lead Engineer \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Fire Alarm Engineer / Designer**

Firm \_\_\_\_\_

Lead Engineer/Designer \_\_\_\_\_ Contact Person \_\_\_\_\_

Street Address \_\_\_\_\_

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

Phone \_\_\_\_\_

Mobile \_\_\_\_\_

Fax \_\_\_\_\_

Email \_\_\_\_\_

**Fire Suppression Engineer / Designer**

Firm _____		
Lead Engineer _____	Contact Person _____	
Street Address _____		
City _____	State _____	Zip _____
Phone _____		
Mobile _____		
Fax _____		
Email _____		

**NOTICE**

**All work, whether or not shown on the construction documents shall comply with the Pa. UCC (IBC and IRC 2003 as referenced). Work not shown will be field checked to determine compliance. Construction documents shall be on site at time of inspection; if not the inspection may be failed, at the discretion of the inspector, for failure to have them available for reference purpose.**

Universal accessibility to all services, goods, events, and functions offered within the Commonwealth of Pennsylvania is a guaranteed civil right. Please review your construction documents to insure that right has not been violated. Basic compliance with *all* of the provisions of the standard ANSI A117.1 can help to insure that all of our citizens enjoy access to the goods and services offered within the state. Compliance with the provisions of IBC Chapter 11 and ANSI A117.1 will be field verified and shall be mandatory for receipt of a Certificate of Occupancy. Full compliance with accessibility provisions of the codes is mandatory. Failure to include provisions for compliance on the plan, or in the execution of the work is not an excuse to deny basic accessibility to our citizens.

A list of inspections that *probably* will be required, based on the permit application and plan submission, can be obtained from the Code Official at the time of permit issuance. Noted inspections may be waived or additional inspections may be required, at the discretion of the Code Official, as deemed necessary in order to insure Code Compliance. Inspection approval must be obtained for the work currently complete before proceeding to the next step of construction listed in order for each trade.

All inspections will be conducted by Commonwealth Code Inspection Service, with the exception of special inspections required by the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional; or as otherwise directed by the authority having jurisdiction. Special inspections shall be performed per the Pa. UCC and/or IBC Chapter 17, and/or at the direction of the Design Professional.

A special inspection program list shall be furnished to Commonwealth Code Inspection Service for approval prior to the start of the project phase associated with the inspection. The list shall include name of company, corporate officers, address and other contact information, accreditation, and qualifications of individual inspectors.

The applicant or authorized representative must request all regular inspections directly through Commonwealth Code Inspection Service, Inc. with at least 24 hours notice.

Same day service for inspections may be provided if calls are received before 8:00 AM. Telephone 717-664-2347 (Main Office) or 800-732-0043 (In Pennsylvania) or Contact your local CCIS office at

## ZONING GUIDELINES

The following activities are examples of activities that require a **stormwater permit** if additional impervious ground cover is created.

- detached gazebos / sheds / garages (less than 240 SF with no electrical / plumbing)
- fences
- decks / patios that are less than 30" above grade.
- non-illuminated signage
- paved and / or stone driveways, parking spaces and sidewalks.
- swimming pools (permanent & temporary that can hold 18 to 23 inches of water with no electrical components)

Complete attached application and submit with a sketch of the project to the Dallastown Borough Office. The drawing must show lot lines, existing features and proposed project location on the property.

The following table summarizes zoning criteria in Dallastown Borough.

Zone	Front Setback	Side Setback	Rear Setback	Accessory structures <sup>1</sup>	Building Height	Lot Coverage	Fencing
R-O	25 ft	10 ft	30 ft	Rear setback: 10 ft Side setback: combined total of 8 ft or more, no less than 3 ft on one side	Principal structure: 2 ½ stories, but not over 30 ft. Accessory structure: 2 stories, but not over 25 ft	Up to 45% may be covered with impervious surfaces	Up to 6 ft. in height in rear and side yards; up to 3 ft in height in front yards.
R-T	15 ft	SFD <sup>2</sup> : 5 ft All other: 10 ft	20 ft	Rear setback: 10 ft Side setback: combined total of 8 ft or more, no less than 3 ft on one side	Principal structure: 2 ½ stories, but not over 30 ft. <sup>3</sup> Accessory structure: 2 stories, but not over 25 ft	Up to 60% <sup>4</sup> may be covered with impervious surfaces	Properties with yards bounded by streets, lanes or avenues, the height of the fence is limited to 3 ft.
C-S	15 ft	10 ft	20 ft	Rear setback: 10 ft Side setback: combined total of 8 ft or more, no less than 3 ft on one side	Principal structure: 2 ½ stories, but not over 30 ft. Accessory structure: 2 stories, but not over 25 ft	Up to 90% may be covered with impervious surfaces	
C-H	25 ft	20 ft	10 ft	-----	Principal structure: 2 ½ stories, but not over 30 ft. <sup>5</sup> Accessory structure: 2 stories, but not over 25 ft	Up to 80% may be covered with impervious surfaces	
I-G	30 ft	20 ft	30 ft	-----	Principal structure: 3 stories, but not over 35 ft. Accessory structure: 2 stories, but not over 25 ft	Up to 90% may be covered with impervious surfaces	Up to 8 ft in height in all yard areas.

<sup>1</sup> Accessory structure are allowed between the rear wall of the principal structure (min of 10 ft away) and the rear setback line.

<sup>2</sup> SFD = single family detached dwelling

<sup>3</sup> Height limit may be extended to 3½ stories but not over 40 ft. if each yard is increased one ft. width for each additional ft. of height over 30 ft.

<sup>4</sup> 70% lot coverage is acceptable for properties where the lot width is less than 40 feet.

<sup>5</sup> Height limit may be extended to 3½ stories but not over 40 ft. if each yard is increased one ft. width for each additional ft. of height over 30 ft.

\*Swimming pools may require a building permit in addition to a zoning permit

\*Additional Zoning criteria will be reviewed at the time your submitted plan is reviewed. Refer to [www.dallastownboro.com](http://www.dallastownboro.com) for a complete text of the Zoning Ordinance.

Zoning Districts: R-O = Residential Outlying; R-T = Residential Town; C-S = Commercial Shopping; C-H = Commercial Heavy & Highway; I-G = Industrial General

## **STORMWATER MANAGEMENT GUIDELINES**

Applications for adding additional impervious areas (impervious materials and surfaces include buildings, decks, patios, porches, garages, pools, sidewalks, stone and paved driveways, stone and paved parking areas, sheds, etc.) to your property will require stormwater runoff considerations. A stormwater permit is required.

The calculation of impervious square footage subject to the Small Project Site Activities fee in lieu program shall run with the land and shall be cumulative beginning January 1, 2013 (Ordinance 575-12). The initial and all future projects subject to payment, as set forth in the fee schedule below, shall be added to any future projects for the purpose of (a) calculating any fee; and (b) determining eligibility for the Small Project Site Activities fee in lieu provisions. Once the total of all projects exceed 500 sq feet (cumulative from 1/1/13), the property is no longer eligible for a Small Project Site Activity payment in lieu of. The construction of a Stormwater Best Management Practices (BMP) under the Dallastown Borough Stormwater Management Ordinance is required. A Stormwater Permit is required regardless for all projects. Once the total accumulated impervious area exceeds 1000 square feet, a Stormwater Management Plan (SWM) prepared by an engineer is required. The Borough Engineer will review the SWM plan and inspect the construction of the stormwater BMP.

### **STORMWATER PERMIT FEE SCHEDULE TABLE**

<b>0 – 250 SF:</b> \$1.50 / SF or pay no fee and install a small projects stormwater BMP
<b>251 – 500 SF:</b> \$375 plus \$3.00 / SF or pay no fee but install a small projects stormwater BMP
<b>501 – 1000 SF:</b> \$50 plan review & inspection fee to install a stormwater BMP per the stormwater ordinance
<b>&gt; 1000 SF:</b> \$200 application fee plus review and inspection fees for a professionally designed stormwater BMP

## **DEMOLITION GUIDELINES**

### **§ 224-29 Demolition.**

Demolition of any structure must be completed within 90 days of the issuance of a permit. Completion consists of tearing the structure down to grade, filling any resulting cavity to grade and removing all resulting debris from the lot. Wood, asphalt shingles and similar building materials shall not be buried or used as fill at the demolition site but must be disposed of at an approved solid waste disposal facility certified to dispose of such materials. A structure may be partly demolished only if a usable structure or building remains, and the demolition of the part is completed as required in the previous sentence. All evidence of the structure which was demolished must be removed from the exterior surfaces of the remaining structure or building. Proof of performance bond and liability insurance must be shown for work of \$1,000 or more.

### **§ 90-5 Fees**

Demolitions. For a permit for the demolition of a building or structure, the fee shall be equal to 10% of the total cost of demolition.