

BUILDING SUBCODE TECHNICAL SECTION



DATE RECEIVED **DATE ISSUED**

R/N

R/O

A. IDENTIFICATION - APPLICANT: COMPLETE ALL APPLICABLE II	NFORMATION, WHEN CHANGING	I Lidvii π	C/N
CONTRACTORS, NOTIFY THIS OFFICE.			C/O
Work Site Location		1	
Owner		1	
Address		`,	
Address		D. TECHNICAL SITE DATA	I .
Telephone ()		DESCRIPTION OF WORK	
Contractor		ii	1
Address		L)	I I
Telephone ()		1 [i
License Number or Builders Reg. No		ri e	1
Federal Emp. No.		T I	
PA. HIC #		11	
		<u>-</u>	l'i
JOB SUMMARY (OFFICE USE ONLY)		i	I
PLAN REVIEW Date Initial INSPECTIONS	DATES (MONTH/DAY)	1	I .
No Plans Required TYPE:	FAILURE FAILURE APPROVAL INITIAL	1	
All FOOTING			
Footing — FOUNDATION			
Foundation SLAB		TYPE OF WORK:	FEE (OFFICE USE ONLY)
Frame FRAME		NEW BUILDING	\$
Other BARRIER-FREE		ADDITION	
JOINT PLAN REVIEW REQUIRED: INSULATION ELEC PLUMB. FIRE ELEVATOR FINISHED		ALTERATION	
SUBCODE APPROVAL ENERGY		ROOFING	
CO CCO CA MECHANICAL		SIDING	
DATE: TCO		FENCE	
APPROVED BY: OTHER		□ SIGN —— SQ.FT.	
FINALL		ASBESTOS ABATEMENT	
BARRIER-FREE		LEAD HAZ. ABATEMENT	
		OTHER	
B. BUILDING CHARACTERISTICS	EST. COST OF BUILDING WORK:	DEMOLITION	
USE GROUP PRESENT PROPOSED	1. NEW BUILDING \$. –]
CONSTR. CLASS PRESENT PROPOSED	2. ALTERATION \$	ADMINISTRATIVE CHARGE	\$
NUMBER OF STORIES	3. TOTAL (1 + 2) \$	UCC INSPECTION	\$
·	C. CERTIFICATION IN LIEU OF OATH		\$
AREA - LARGEST FLOOR SQ.FT.	I HEREBY CERTIFY I AM THE (AGENT OF OWNER OF RECORD AND AM AUTHOR)		\$
NEW BUILDING. AREA/ ALL FLOORS SQ.FT.	TO MAKE THIS APPLICATION		
VOLUME OF NEW STRUCTURE CU.FT.		I	