

BOROUGH OF WYOMISSING, BERKS COUNTY
UCC COMMERCIAL BUILDING PERMIT APPLICATION

Borough of Wyomissing UCC Commercial Building Permit Application & Instructions

Kraft Code Services, LLC, is responsible for performing all Uniform Construction Code building plan review and related inspections. All building permit and plan review related questions should be directed to Kraft Code Services at 610-775-7185 or contact@kraftcodeservices.com.

Permit related inspections can be scheduled by calling 610-775-7185.

Below are basic guidelines for the submission of a commercial building permit application.

- Building permit applications will not be accepted without being accompanied by a permit deposit fee of \$125.00, payable to the Borough of Wyomissing.
- **The completed permit application must be accompanied by two (2) sets of plans, prepared and stamped and sealed by a registered architect or a licensed professional engineer, licensed in the Commonwealth of Pennsylvania.**
- Building plans submitted with the permit application should include all architectural and structural details for the areas to be included with the permitted work, along with plumbing, mechanical, electrical, fire protection and accessibility details and specifications, where applicable.
- Two (2) sets of the site plan for the project must be attached to the permit application and adequately show all property line setbacks, the existing and proposed building footprint at grade level, and the square footage of all existing and proposed paved surfaces.
- If applicable, full engineering data and calculations must be submitted with all commercial building permit applications. These would include but are not limited to: fire protection calculations, HVAC ventilation schedules, plumbing fixture unit calculations, fuel gas pipe sizing calculations, electrical service calculations, etc.
- An Energy Conservation Code compliance certificate or equivalent must be submitted with all applications for new construction.
- A copy of the approval letter for E&S control from the Berks County Conservation District should be submitted, if applicable.
- **The UCC permits a 30 business day review period for all commercial building permit applications. NO WORK SHALL BEGIN ON ANY PROJECT UNTIL A BUILDING PERMIT HAS BEEN ISSUED AND PAID FOR IN FULL.**
- A Certificate of Workman's Compensation Insurance must be submitted with this application.

The approved/issued building permit will be accompanied by a permit card and supporting documentation that will be returned to the applicant upon receipt of payment in full for the permit. The permit will detail all required inspections specific to the project. The permit card and associated plans and other documents MUST BE KEPT ON THE PROJECT SITE AT ALL TIMES.

Staff Use Only

Date Received at Borough Hall: _____

Date/Amount Permit Deposit Paid: _____

Cash? Y/N

Check#

Received By: _____

BOROUGH OF WYOMISSING, BERKS COUNTY
UCC COMMERCIAL BUILDING PERMIT APPLICATION

BUILDING PERMIT NO: _____ DATE PROCESSED: _____

SITE ADDRESS: _____

TOTAL LOT AREA IN SQUARE FEET: _____

APPLICANT: _____

ADDRESS: _____

TEL#: _____ CELL: _____ EMAIL: _____

PROPERTY OWNER: _____

CONTRACTOR: _____ TEL#: _____

ARCHITECT: _____ TEL#: _____

TYPE OF WORK OR IMPROVEMENT: (CHECK ALL THAT APPLY)

- New Building Addition Alteration Repair Demolition Relocation Foundation Only
 Plumbing Mechanical Electrical Sign Fire Protection ADA/Accessibility Change of Use

Describe Scope of Work: _____

ESTIMATED COST OF CONSTRUCTION (To include time and materials): _____

****Detailed estimates may be requested to verify underestimated values****

CONSTRUCTION TYPE (IBC CHAPTER 6): _____

DESCRIPTION OF BUILDING USE:

Specific Use: _____ Use Group: _____ **Change in Use?** Y/N

Business Name: _____

If Change in Use, Indicate Former Use: _____ Maximum Occupancy: _____

DOES OR WILL YOUR BUILDING CONTAIN ANY OF THE FOLLOWING:

Fire Alarm System: Yes No

Elevator/Escalator/Lifts/Moving Walks: Yes No

Automatic Sprinkler System: Yes No

BUILDING DIMENSIONS:

Existing Building Area (S.F.): _____ No. of Existing Stories: _____

Proposed Building Area (S.F.): _____ No. of Stories Proposed: _____

Total Building Area (S.F.): _____ Height Above Grade: _____

Gross Area of Grade Level Floor (S.F.): _____

