



NORTH STRABANE TOWNSHIP
DEPARTMENT OF BUILDING CODE ENFORCEMENT
 1929 Route 519 South • Canonsburg, PA • 15317 • 724-745-8880 • Fax 724-745-8935



Factory Built Home Application Requirements

Industrial or Manufactured Housing is the technical designation of modular homes and trailers. Both are built off site and while they fall under the same residential building code as site built homes most inspections are done at the factory prior to shipping. All industrial and manufactured homes are inspected by a HUD certified Design Approval Primary Inspection Agency (DPIA). Both have additional requirements for the issuance of building and occupancy permits.

Modular Home (Industrial Housing) Transported by truck and normally lifted into place, section by section with a crane. Modular Homes can be of any size or shape and are fairly indistinguishable from site built homes.

Trailer (Manufactured Housing) Also a called mobile home, is built on a permanent chassis and is hauled over the road on its own wheels. Can be stacked as modular.

GENERAL REQUIREMENTS FOR PERMIT APPLICATION SUBMITTAL

Manufactured Home (Trailer/Doublewide)	Industrialized (Modular)
<input type="checkbox"/> Complete Permit Application	<input type="checkbox"/> Complete Permit Application
<input type="checkbox"/> Sealed survey showing building location	<input type="checkbox"/> Sealed survey showing building location
<input type="checkbox"/> Workers Comp Insurance Certificate	<input type="checkbox"/> Workers Comp Insurance Certificate
<input type="checkbox"/> Highway Occupancy permit if State Highway	<input type="checkbox"/> Highway occupancy permit if State Highway
<input type="checkbox"/> Road occupancy if township road	<input type="checkbox"/> Road occupancy if township road
<input type="checkbox"/> Proof of accepted means of sewage disposal	<input type="checkbox"/> Proof of accepted means of sewage disposal
	<input type="checkbox"/> Current "Notice of Approval" manufacturer
<input type="checkbox"/> PA State Installers Certificate / License	<input type="checkbox"/> Blank "Site Inspection Form"
<input type="checkbox"/> Approved DAPIA stamped drawings	<input type="checkbox"/> Approved DAPIA stamped drawings
<input type="checkbox"/> Approved "Manufacturers Installation Instructions"	<input type="checkbox"/> Approved "Manufacturers Installation Instructions"
<input type="checkbox"/> Proof of compliance for Thermal Zone 3	<input type="checkbox"/> Footing/Foundation drawings and details
<input type="checkbox"/> Footing / Foundation Details and Anchorage	
<input type="checkbox"/> Installation Check List	
<input type="checkbox"/> USED HOMES – A habitability checklist may be submitted in place of stamped drawings and the Thermal Zone requirements.	

Decks, roofs, garages, carports or any other structural additions may not be structurally supported or attached to a factory built home without approval of the manufacturer.

USED TRAILERS BEING MOVED AND REUSED MUST COMPLY WITH THE ABOVE REQUIREMENTS AND BUILDING CODE IN AFFECT AT THE TIME OF THE MOVE.

All decks, porches, utility hookups and other are to be reviewed and installed in accordance with the State Unified Construction Code



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Factory Built Home Permit Application					
A. Applicant: Applicant is: <input type="checkbox"/> Owner <input type="checkbox"/> Authorized agent of owner					
Name / Co.				Phone	
				Email	
Street address		Suite	City		State
					Zip
B. Owner (if different from applicant)					
Name / Co.				Phone	
				Email	
Street address		Suite	City		State
					Zip
C. Property information:					
Street address			Parcel ID.		Lot No.
City		State	Zip	Plan Name	
D. Purpose of application:					
Application For:		<input type="checkbox"/> Addition to	<input type="checkbox"/> Alteration / repair	<input type="checkbox"/> Demolition	<input type="checkbox"/> Other
<input type="checkbox"/> New Manufactured (Mobile) Home		Installer		Phone	
<input type="checkbox"/> Used Manufactured (Mobile) Home					
<input type="checkbox"/> Industrialized (Modular) Home				Email	
Description of proposed work (Basement, crawlspace, other)					
Area of work (sq.ft.)		No. stories		Project value est. \$	
E. Declaration of applicant					
I HEREBY CERTIFY THAT ALL STATEMENTS CONTAINED ABOVE ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT AND HEREBY APPLY FOR A BUILDING PERMIT TO PERFORM THE WORK ON THE PREMISES AS DESCRIBED ABOVE. I FURTHER UNDERSTAND THAT I MUST COMPLY WITH THE PROVISIONS OF ALL LAWS AND ORDINANCES AS ADOPTED BY THE TOWNSHIP AND THE UNIFIED CONSTRUCTION CODE OF PENNSYLVANIA.					
_____			_____		
Signature of applicant			Date		

Received By _____ Date _____

**RESIDENTIAL SPRINKLER SUPPLEMENTAL
(FOR NEW SINGLE FAMILY INDUSTRIALIZED HOMES)**

In 20011, House Bill 377 became law requiring "All newly constructed Single Family homes shall be equipped throughout with a code compliant fire sprinkler system, unless prior to entering into contract, the builder and home buyer agree as follows."

- The option install an automatic sprinkler system is provided.
- Information explaining the initial and ongoing cost of installing a residential fire sprinkler system is provided. (BELOW)
 - North Strabane Township Ord. no. 313, 6/27/2006 requires all residential fire sprinkler systems to be inspected by the NST Fire Department every 2 (two) years.
 - A fee of \$20.00 (Twenty Dollars) will be assessed, in accordance with NST Resolution No. 2012-5.
- Information, as made available buy the PA State Fire Commissioners Office, on the possible benefits of installing a sprinkler system is provided.

In addition to the above it also became mandatory that in the event it is decided not to install an Automatic Fire Sprinkler System, any ceiling / floor assembly, not fire rated, (unfinished ceilings in areas with living space above, NORMALLY the basement with exposed floor joist) shall be protected by sprinklers, covered, with a minimum 1/2-Inch gypsum wall board, covered with 5/8-inch wood structural panel (plywood) or covered with equivalent approved material.

- Exceptions:
 - The unprotected level is located over a crawlspace not intended for storage.
 - The space does not exceed 80 sq.ft. is properly fire blocked or is constructed of dimensional or composite lumber equal to or greater than 2-inch by 10-inch nominal dimension lumber.

I HEREBY CERTIFY THAT I HAVE READ THE STATEMENTS CONTAINED ABOVE AND THE INFORMATION REGARDING RESIDENTIAL SPRINKLER SYSTEMS AS PROVIDED BY BUILDER, THE PA FIRE COMMISSIONERS OFFICE AND OR LOCAL FIRE DEPARTMENT. I UNDERSTAND THE RISKS AND REQUIREMENTS OF NOT HAVING A FIRE SPRINKLER SYSTEM INSTALLED IN MY HOME. I AM THEREFORE APPLING FOR A BUILDING PERMIT TO PERFORM THE WORK ON THE PREMISES AS DESCRIBED, IN THE ATTACHED DOCUMENTATION IN ACCORDANCE WITH THE LAWS AND REGULATIONS OF THE STATE OF PENNSYLVANIA AND THE TOWNSHIP OF DONEGAL.

Applicant: _____ Date: _____

Workers' Compensation Insurance Coverage Information
(Attach to building permit application)

A. The applicant is a contractor within the meaning of the Pennsylvania Workers' Compensation Law

Yes

No

If "Yes", Complete sections B and C below as appropriate

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for workers' compensation. Certificate Attached.

Name of Workers' Compensation Insurer _____

Workers' Compensation Policy No. _____

Policy Expiration Date _____

C. Exemptions

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

The undersigned swears or affirms that he/she is not required to provide workers' compensation insurance under the provisions of Pennsylvania's 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 building 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: _____

(SEAL)

Signature of applicant: _____

Address: _____

County of: _____

Municipality of: _____

APPLICATION FOR TOWNSHIP ROAD OCCUPANCY PERMIT

North Strabane, Washington County
1929 Route 519 S. Canonsburg PA 15317

Date: ____ / ____ / ____

Permit Fee \$ _____

Inspection Fee \$ _____

Total \$ _____

ROUTE NO. ROAD OR STREET WHERE WORK IS BEING DONE

Application is hereby made by _____
NAME OF APPLICANT

Address: _____ City: _____ State: _____ Zip Code: _____

Description of work: _____

Under and subject to all the conditions, restrictions and regulations prescribed by the Township and on the general provisions and specifications, a true Copy, hereof is attached and made part thereof; with the same force and effect as if written or printed herein and under and subject to the special conditions, restrictions and regulations hereafter set forth.

General:

Approximate date when work will be started: _____ approximate date work will be complete: _____. The road surface is improved to a width of _____ feet. Distance from the center of line to roadway to ditch: _____. Distance from centerline of road to Right-Of-Way _____ feet.

Poles and Tower:

Number of poles to be erected: _____ Nearest distance from center of road to structure: _____ Feet. Distance of proposed work along road: _____ Feet.

Pipelines and Conduits:

The improved surface of the road (will) (will not) be opened. Approximate area of opening in improved surface: _____ Sq. Yds. Approximate area of openings on unimproved part: _____ Sq. Yds. Length of trench along road: _____ Ft. Depth of trench below surface: _____ Ft. / Inch

TO BE COMPLETED BY TOWNSHIP

Date Submitted: _____

Schedule Item No.						
Unit Fee						
Number of Units						
Total Fee						

The applicant is (and individual) (a partnership) (a corporation incorporated under the law of _____)

(Corporate Seal)

Name of applicant: _____

Applicants Contact Info. _____

Representative: _____

GENERAL INSTRUCTIONS

Any work performed within the right-of-way of a township road requires submission of three (3) copies of this form along with three (3) copies of a sketch showing the location and details of proposed work. Any work on a township road over, under, or within the limits of a limited access state highway, requires a state permit. The prescribed permit fee shall accompany the application and sketch. Schedules of fees are furnished on request.
THE FEE SHALL BE PAID BY CHECK OR MONEY ORDER AND SHALL BE MADE TO NORTH STRABANE TOWNSHIP