

## **IMPORTANT:**

## Pennsylvania adoption of the 2018 ICC Codes

## \*Effective February 14, 2022, Pennsylvania will enforce the 2018 ICC Codes\*

There is a six-month grace period where projects can be submitted to be reviewed under the 2015 UCC Codes. This grace period applies to projects that are under contract prior to February 14, 2022, and are submitted for permit no later than August 14, 2022.

Projects with a contract date after February 14, 2022 and, or permit applications received after August 14, 2022 will be reviewed under the 2018 PA UCC Codes and all updated references.

## **HATFIELD TOWNSHIP**

#### ANNUAL FACILITIES PERMIT REQUIREMENTS

Annual Facilities Permit is for manufacturing, institutions, (such as hospitals) educational and rental facilities that regularly perform routine repairs, replacement and maintenance on any electrical, plumbing and mechanical systems. The applicant may apply for a single annual permit that will allow these alterations to be made over a 12-month period.

Hatfield Township will issue an Annual Facilities Permit under the following conditions:

- All work installed has been approved for code compliance under the current occupancy use.
- The owner/agent must certify that the persons performing the work are employed at this facility and are "qualified tradespersons".
- The permit holder must agree to maintain detailed records of all repairs, replacement and maintenance made under the permit and to make these available, upon request, to Hatfield Township fire and code officials.

#### SCHEDULE OF FEES

(from Resolution 11-42)

#### **Annual Permit Fee:**

\$275.00

#### **INSPECTIONS REQUIRED**

Call the Township Safety and Code Enforcement Department (215-855-0900) at least 24 hours in advance to schedule each inspection.

- Rough (before close-in)
- Final

<u>NOTE</u>: ALL ELECTRICAL WORK must be inspected by **UNITED INSPECTION AGENCY, INC.** (215-542-9977)

# **HATFIELD TOWNSHIP**

### ANNUAL FACILITIES PERMIT REGISTRATION FORM

APPLICANT NAME:			_
COMPANY:			_
ADDRESS:			_
CITY:	STATE:	ZIP CODE:	_
PHONE NO:	FAX N	0:	_
EMAIL ADDRESS:			
TYPE OF BUSINESS:	_ Individual Proprietorship Corporation	Partnership a Limited Liability Com	pany
INSTALLATIONS TO BE ALTER	<u>RED</u> :		
	Electrical Mechanical	Gas Plumbing	
TRADESPERSONS INFORMATI	ON:		
INDIVIDUAL NAME	<u>TRADE</u>	TYPE OF REGISTRATION	
OWNER/OPERATOR CERTIFICA	ATION:		
As owner/operator of this building	or premises where these repairs, re	placement and maintenance may take pl	ace, I certify that:
	will be performed by persons regu	larly employed at this location and who	is a qualified
	of all work performed under the A ip fire and code official.	nnual Facilities Permit will be maintaine	d for inspection by
Owner Name (type or prin	<u> </u>		_
Mailing Address			
Phone Number			_
Signature			_
Date			_
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Use your smart-phone to scan this QR code and find the corresponding Ordinance online.