



# Safety and Code Enforcement Department

## Emergency Responder Radio Coverage Permit Application Submittal Requirements (ERRC)

### **Emergency Responder Radio Coverage in New and Existing Buildings**

All buildings shall have approved radio coverage for emergency responders within the building based upon the existing coverage levels of the public safety communications systems of the jurisdiction at the exterior of the building (Montgomery County Department of Public Safety Communications Center). This regulation shall not require the improvement of the existing public safety communication system.

Emergency responder radio coverage initial signal survey testing shall be performed within all buildings meeting any one of the following conditions:

1. The building is 3 or more stories above grade plane.
2. The total building area is 30,000 square feet.
3. The building has one or more basement or below grade building levels.
4. Any underground building.
5. Any windowless building.
6. As require by the Fire Code Official due to the building construction, occupancy classification, or other special circumstances.

Initial signal survey testing for signal strength will not be conducted prior to all structural construction being complete, and all doors, windows and exterior openings closed. Significant signal impairments such as high-pile storage, roof mounted solar photovoltaic systems, extensive metallic processing equipment, multiple interior room enclosures, and other potential radio signal obstructions shall be in place and operational at the time of initial signal survey testing.

Final signal survey testing for the new ERRC system shall not be conducted until all construction activity and interior fit outs are completed.

An approved emergency responder radio coverage system shall be provided within any building that, through signal survey testing, does not meet the ERRC requirements of the International Fire Code.

The timeframe for initial signal survey testing, permit application submittal, installation, and final signal survey testing in existing buildings shall be determined by Hatfield Township.

The following areas have been designated as critical areas by the AHJ and shall be provided with 99% floor area radio coverage:

- Fire command centers.
- Fire pump rooms.
- Sprinkler riser locations.
- Sprinkler sectional valve locations.
- Standpipe outlet locations.
- Fire alarm control panel locations.
- Exit stairs.
- Exit passageways / corridors.
- Elevator lobbies.
- Other areas designated by the AHJ based on the specific occupancy.

All critical areas listed above shall be tested individually and shall not be counted towards the 20-test area count.

Initial and final signal survey testing results will be certified by the testing contractor and forwarded to the fire marshal.

### **ERRC Permit Submittals**

ERRC (Electrical Permit Application) submission shall be in accordance with this document and include all design information listed in International Fire Code. The ERRC system design and installation shall be in accordance with all applicable Pennsylvania Uniform Construction Code, NFPA, U.L., and FCC requirements. The following documents, information and details must be submitted for review to [firepermits@hatfield.org](mailto:firepermits@hatfield.org)

#### **The electronic (.PDF) permit application submittal must include:**

- A fully completed and signed Electrical Permit Application.
- The permit fee by cash or check. (Hand delivered, USPS, or equivalent).
- A copy of the completed ERRC Initial Signal Survey Analysis Report.
- Floors plans / shop drawings drawn to scale or with all dimensions indicated; and including the construction of the ERRC equipment enclosure, amplification system configuration, signal booster locations, standby power configurations, device legend, and signed by system designer.
- A one-line diagram.
- Manufacture's cut sheets / equipment data sheets for all ERRC system devices, equipment, and materials.
- A copy of a valid FCC-issued General Radio Operators License (for both system designer and lead installer).
- A copy of the Certification of In-Building System Training issued by an approved organization, or approved school, or a certificate issued by the manufacturer of the equipment being installed (for both system designer and lead installer).

**Final ERRC system installation approval and permit closure:**

- Completion and approval of all required field inspections and acceptance testing / signal surveys.
- Final electrical inspection approval, (sticker on cabinet).
- Submission of a Final Signal Survey Analysis Report in .PDF.
- Submission of as-built shop drawings in .PDF.

BDA Info for the Montgomery County 700/800 MHz Trunked System

2022

WGS84		WGS84		Licensed Actual ERP			
Name	Latitude (°)	Longitude (°)	Callsigns	ERP (W)	ERP (W)	Structure Type	Simulcast Cell
Adams Road	40.4119	-75.5373	WQED570, WQSL814	148	147	SST	West
Burn Brae	40.1450	-75.1514	WPRX629, WQSL808	166	142	SST	East
Cheltenham	40.0596	-75.1094	WRFS569, WRCZ966	145	144	Monopole	East
Eagleville East	40.1580	-75.4171	WPRX629, WQSL808	115	113	SST	East
Eagleville West	40.1580	-75.4171	WQDU634, WQSL814	182	159	SST	West
Gladwyne	40.0355	-75.2814	WPRX629, WQSL808	93	76	SST	East
GLR Park	40.3431	-75.4935	WRDM242, WRCZ967	162	140	SST	West
Graterford	40.2364	-75.4261	WRDM242, WRCZ967	87	56	Water Tank	West
Gulph Road	40.0881	-75.4048	WRFS569, WRCZ966	166	142	SST	East
Hatfield	40.2851	-75.2865	WQDU634, WQSL814	138	120	Monopole	West
Hughes Road	40.0728	-75.3576	WRFS569, WRCZ966	129	129	SST	East
Lankenau Hospital	39.9881	-75.2619	WPRX629, WQSL808	245	240	Rooftop	East
Lower Gwynedd	40.1704	-75.2264	WPSF784, WQSL816	115	81	Water Tank	East
Lower Moreland	40.1241	-75.0615	WPSF784, WQSL808	93	78	SST	East
Mermaid Lane	40.0826	-75.1811	WPSF784, WQSL816	98	94	SST	East
Montgomery East	40.2172	-75.2168	WRFS569, WRCZ966	209	137	Water Tank	East
Montgomery West	40.2172	-75.2168	WRDM242, WRCZ967	209	137	Water Tank	West
Plymouth Tank	40.1202	-75.2982	WPSF784, WQSL816	110	85	Water Tank	East
Pottstown	40.2559	-75.6640	WRDM242, WRCZ967	132	131	Monopole	West
Ringing Hill	40.2706	-75.6082	WQED570, WQSL814	95	78	SST	West
Roxborough	40.0600	-75.2405	WRFS569, WRCZ966	123	101	SST	East
Sassamansville	40.3372	-75.5663	WQED570, WQSL809	162	139	SST	West
Schwenksville	40.2641	-75.4682	WQDU634, WQSL809	162	144	Water Tank	West
Southampton	40.1687	-75.0500	WRFS569, WRCZ966	166	137	SST	East
Tylersport	40.3457	-75.4181	WQED570, WQSL809	91	54	Guyed	West
Upper Gwynedd	40.2106	-75.2900	WQDU634, WQSL809	132	111	SST	West
Upper Pottsgrove	40.2950	-75.6403	WRDM242, WRCZ967	151	79	Monopole	West
Upper Providence	40.1668	-75.5048	WQDU634, WQSL814	129	128	Water Tank	West
Valley Forge	40.0884	-75.4796	WRDM242, WRCZ967	166	88	Monopole	West
Willow Grove	40.1423	-75.1062	WPSF784, WQSL816	72	71	SST	East

West Zone Frequencies

CH1 =	853.45000
CH2 =	852.65000
CH3 =	852.13750
CH4 =	851.77500
CH5 =	851.55000
CH6 =	851.32500
CH7 =	851.03750
CH 8 =	859.06250
CH9 =	774.43125
CH10 =	774.13125
CH11 =	773.70625
CH12 =	772.15625
CH13 =	771.05625
CH14 =	770.30625

East Zone Frequencies

CH1 =	853.76250
CH2 =	852.37500
CH3 =	852.26250
CH4 =	851.88750
CH5 =	851.63750
CH6 =	851.26250
CH7 =	856.73750
CH8 =	855.93750
CH9 =	855.23750
CH10 =	854.96250
CH11 =	774.73125
CH12 =	772.78125
CH13 =	771.83125
CH14 =	771.40625
CH15 =	769.85625
CH16 =	769.30625

# HATFIELD TOWNSHIP

## **ELECTRICAL - TELECOMMUNICATION/DATA PERMIT APPLICATION**

### **PART I – PROPERTY LOCATION**

Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

### **PART II – NON-RESIDENTIAL PROPERTY**

Business Name/Tenant: \_\_\_\_\_

### **PART III - IDENTIFICATION** – To be completed by all applicants

APPLICANT Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

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

OWNER Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

ELECTRICIAN Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

State License Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

DESIGN Name: \_\_\_\_\_ Phone: \_\_\_\_\_

PROFFESIONAL

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**PART IV – TYPE OF USE GROUP**

USE GROUP: \_\_\_\_\_  
\_\_\_\_\_

**PART V – TYPE OF WORK**

ELECTRICAL                      TELECOMMUNICATION/DATA                      (Circle One)

**PART VI – TYPE OF CONSTRUCTION**

NEW                      ALTERATION                      REPAIR                      ADDITION                      (Circle One)

SERVICE SIZE IN AMPERES: \_\_\_\_\_ PHASE: \_\_\_\_\_

**BRIEF DESCRIPTION OF WORK:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**VII – DIMENSIONS**

Total square footage of construction area, based on exterior dimensions \_\_\_\_\_ sq. ft.

Number of stories \_\_\_\_\_

Total building square footage \_\_\_\_\_ (if not the same as above)

**PART VIII - COST**

Cost of Electrical Improvements \$ \_\_\_\_\_

**PERMIT FEE: \$ \_\_\_\_\_**

**PART IX - SIGNATURE**

*Deposit of Check Representing the Fee for this Application does not Constitute Approval of or Granting of Same by Hatfield Township. I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his agent and we agree to conform to all applicable laws of Hatfield Township.*

**SIGNATURE OF APPLICANT**

**DATE**

\_\_\_\_\_

## **INSPECTIONS REQUIRED**

- Service
- Rough wire (before close-in)
- Above Ceiling
- Final inspection required on all work

**In ground pools: 2 bonding (1 pool & 1 deck) and final inspections.**

**NOTE:** ALL ELECTRICAL AND TELECOMMUNICATION WORK must be inspected by **UNITED INSPECTION AGENCY, INC. (215-542-9977)**. Inspection and Plan Review fees are included in permit fees. If an inspection fails twice for the same code violation, a reinspection fee will be required prior to a third inspection.

## **SCHEDULE OF FEES**

### **Electrical Permit Fees:**

**Please check that which applies to this project:**

#### **RESIDENTIAL (One & Two Family Dwellings)**

- **New Construction**
  - \$300.00 – Single Family – Up to 400 amps
  - \$350.00 – Single Family – 401 amps to 600 amps
  - Single Family – 600 amps and up price quoted after plan review
- **Alterations – Replacement – Renovations**
  - \$175.00 for the first 2000 sq. ft.  
\$0.10 per each additional square foot over 2001 sq. ft.

#### **NON-RESIDENTIAL (All Use Groups Except One & Two Family Dwellings)**

- **New Construction – Alterations – Renovations - Replacements**
  - \$250.00 for the first 2000 sq. ft
  - \$0.15 per each additional square foot from 2001 to 20,000 sq. ft.
  - \$0.13 per each additional square foot from 20,001 to 50,000 sq. ft.
  - 50,001 sq. ft. and above – price quoted after plan review.

**MISCELLANEOUS (All Use Groups)**

<input type="checkbox"/>	HVAC wiring	\$90.00
<input type="checkbox"/>	Illuminated Sign(s)	\$100.00
<input type="checkbox"/>	Above Ground Pool/Spa	\$185.00
<input type="checkbox"/>	In Ground Pool	\$280.00
<input type="checkbox"/>	Geothermal System Hook Up	\$90.00
<input type="checkbox"/>	100 amp service (new/replace/repair)	\$95.00
<input type="checkbox"/>	200 amp service (new/replace/repair)	\$125.00
<input type="checkbox"/>	400, 600 amp service (new/replace/repair)	\$135.00
<input type="checkbox"/>	Temporary Services regardless of size	\$175.00
<input type="checkbox"/>	Parking lot poles (first 5 poles) Each additional pole	\$90.00 \$7.50
	Consulting fee per hour	\$85.00

**VOICE, DATA & FIRE ALARM WIRING (All Use Groups)**

<input type="checkbox"/>	Up to 50 devices	\$100.00
<input type="checkbox"/>	51 to 100 devices	\$175.00
<input type="checkbox"/>	101 to 150 devices	\$250.00
<input type="checkbox"/>	151 to 200 devices	\$350.00
<input type="checkbox"/>	Over 201 devices - Prices quoted after plan review	
<input type="checkbox"/>	Equipment room – Prices quoted after plan review	

**Re-Inspection Fee**

A fee may be applied if a third inspection is necessary.	\$30.00
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# CONTRACTOR REGISTRATION FORM

NAME OF COMPANY \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE NO \_\_\_\_\_ FAX NO \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

TYPE OF BUSINESS

Individual Proprietorship

Partnership

Corporation

Limited Liability Company

Number of years you have been in business \_\_\_\_\_

Has your license or registration been revoked by any municipality within the last 2 years? \_\_\_\_\_

Have you any outstanding civil or criminal judgments pertaining to your work as a contractor? \_\_\_\_\_

If you answered "yes" to any of these questions, please explain on back of this application.

INDIVIDUAL NAME: \_\_\_\_\_

FEE: \$75.00 each

TYPE OF REGISTRATION:

General

Electrical

HVAC/Mechanical

Plumbing

# **WORKERS' COMPENSATION INSURANCE COVERAGE INFORMATION**

**A. THE CONTRACTOR IS:**

A contractor within the meaning of the Pennsylvania Workers' Compensation Law

YES

NO

If the answer is "yes", complete section B and C below as appropriate and sign below.

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**B. INSURANCE INFORMATION** (If filling out this section, the **CONTRACTOR** must sign below)

Name of Contractor \_\_\_\_\_

Federal or State Employer Identification No. \_\_\_\_\_

Contractor is a qualified self-insurer for Workers' Compensation.

Certificate Attached

Name of Workers' Compensation Insurer \_\_\_\_\_

Workers' Compensation Insurance Policy No. \_\_\_\_\_

Certificate Attached (Required)

Policy Expiration Date \_\_\_\_\_

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**C. EXEMPTION** (If filling out this section, the **CONTRACTOR** must sign below)

Complete Section C if the contractor is 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 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 (**Must be notarized**).

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I certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understand that if I knowingly make any false statements herein, I am subject to penalties as may be prescribed by law or ordinance.

**Name / Signature** \_\_\_\_\_

Hatfield Township, 1950 School Road, Hatfield, PA 19440

215-855-0900 215-855-0243 FAX [www.hatfieldtownship.org](http://www.hatfieldtownship.org)