

Borough of Wilkinsburg

APPLICATION FOR DAYCARE OCCUPANCY PERMIT

<u>Application Type</u> (Check one)	<input type="checkbox"/> WITHIN A SINGLE FAMILY RESIDENCE <input type="checkbox"/> EXISTING COMMERCIAL BUILDING-CHANGE OF NAME ONLY <input type="checkbox"/> EXISTING COMMERCIAL BUILDING-CHANGE OF OCCUPANCY <input type="checkbox"/> EXISTING COMMERCIAL BUILDING-ALTERATIONS TO BUILDING <input type="checkbox"/> NEW CONSTRUCTION
<u>Site Information</u>	BUSINESS NAME _____ ADDRESS _____ _____ Subdivision _____ Lot _____ Block _____ FORMER USE _____ SQUARE FEET OF DAYCARE SPACE _____ CONSTRUCTION COST (if applicable) _____
<u>Use/Occupancy Classification:</u> (Check all that apply)	<input type="checkbox"/> E More than 5 children greater than 2 ½ years of age <input type="checkbox"/> E More than 5, but no more than 100 children less than 2 ½ years of age, where each room where children 2 1/2 years of age or less are cared for has an exit door directly to the exterior. <input type="checkbox"/> R 12 or less children of any age, when cared for in a portion of a single-family dwelling <input type="checkbox"/> I-4 More than 5 children less than 2 ½ years of age
<u>Building Owner Information</u>	NAME _____ ADDRESS _____ _____ PHONE _____ FAX _____ EMAIL _____
<u>Tenant Information</u> (If different from building owner)	NAME _____ ADDRESS _____ _____ PHONE _____ FAX _____ EMAIL _____
<u>Zoning Approval Signature</u>	_____ Zoning Code Official
<u>Project Narrative</u>	_____ _____ _____ _____
<u>Building Information</u> (Check all that apply)	Square feet per floor _____ Stories _____ Construction type _____ <input type="checkbox"/> Building is fully sprinklered <input type="checkbox"/> Building has standpipes <input type="checkbox"/> Building has a fire alarm system <input type="checkbox"/> Building has smoke detectors <input type="checkbox"/> Daycare space has fire extinguishers <input type="checkbox"/> Daycare space has exit signs <input type="checkbox"/> Daycare space has emergency lighting

<u>Insurance Information</u>	Company Name _____ Address _____ Policy No. _____ Exp. Date _____ Coverage Amount _____ Note: A copy of your insurance certificate must accompany this application.
<u>Applicant Information</u>	NAME _____ ADDRESS _____ PHONE _____ FAX _____ EMAIL _____ Signature _____ Date _____

-OFFICIAL USE ONLY-

FEE SCHEDULE _____ RESIDENTIAL _____ COMMERCIAL _____ INDUSTRIAL _____ DEMOLITION _____ SIGNS _____ X _____ = _____ OTHER _____ OTHER _____ TOTAL _____	PERMIT ISSUED _____ PERMIT DENIED _____ REASON REVISED _____ Z.H.B.CASE # _____ Z.H.B. DECISION _____ X _____ BUILDING CODE OFFICIAL OR CONSTRUCTION CODE OFFICIAL CERTIFICATION NO. _____
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For Department use only

**DAYCARE OCCUPANCY
REQUIRED INSPECTIONS**
IT IS MANDATORY TO CALL PEI
AT 412-787-1510 EXT. 106 FOR INSPECTIONS:
48-HOUR NOTICE REQUIRED

Project Name: _____

Contact: _____ **Phone** _____

Pre-Occupancy: To determine if a building permit is needed, or to verify existing conditions.

Required:

Date:

Inspector Cert. #

Inspector Signature:

Fire Inspection: Before occupancy permit can be issued.

Required:

Date:

Inspector Cert. #

Inspector Signature:

INSPECTION PENALTY:

Inspections not cancelled by 4:00pm of the previous regular business day preceding the day of the scheduled inspection, and re-inspections of previously failed items that incur subsequent failures of the same punch list item shall be subject to a \$75.00 fee per incident.