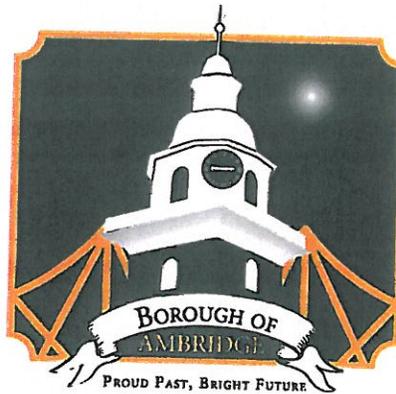


AMBRIDGE BOROUGH



NEW BUSINESS INFORMATION

2016



BOROUGH OF AMBRIDGE
600 Eleventh Street Ambridge, PA 15003
Phone: (724) 266-4070 | FAX: (724) 266-9191 | www.ambridgeboro.org

RE: THANK YOU FOR CONSIDERING AMBRIDGE

Dear Business Owner,

On behalf of the Borough Council and Mayor, please allow me this opportunity to thank you for considering to open your business here in Ambridge. We are confident that the opportunities that exist here will be a benefit to you and will allow your business to prosper.

The Borough of Ambridge has a proud past and bright future that has many available shovel ready development sites, affordable properties, warehouse and distribution facilities that fit a wide spectrum of business uses. Incorporating many incentive programs offered in the Borough such as a commercial tax abatement program, façade grants, historic district tax credits and a HUB zone designation, Ambridge is a welcoming community that has over 200 years of historical significance that has attracted early settlers, mighty industrialist and many multi-generational successful entrepreneurs. Additional county incentives include tax credit programs, low interest loan programs and workforce development and training assistance.

Included in this packet are some handy flyers that reference doing business here and the applications you would need if you are considering a specific location and are ready to move forward with opening your business. If I could be of assistance to you, please do not hesitate to contact me at 724-266-4070 or at jmkauer@ambridgeboro.org, I'd be more than happy to sit down with you to explain the necessary processes, applications and even the community.

Once again, thank you for considering Ambridge, and I look forward to possibly welcoming you as the newest corporate citizen to our community.

Respectfully yours,

THE BOROUGH OF AMBRIDGE



Joseph Kauer
Borough Manager

LIST OF COUNCIL MEMBERS

AMBRIDGE BOROUGH BUILDING COMPLEX
 600 Eleventh Street • Ambridge, PA 15003
 ADMINISTRATION OFFICE: 724-266-4070

TITLE	NAME	EXPIRES
Mayor	Richie D’Ambrosio	12/31/2017
Council President	Michael Mikulich	12/31/2017
Council Vice President	Tina Iorfido Miller	12/31/2017
Councilmember	Stephanie Drewnowski	12/31/2017
Councilmember	Anthony “Tony” Cafarelli	12/31/2017
Councilmember	Janet Caldarelli	12/31/2019
Councilmember	Gerald “Duke” McCoy	12/31/2019
Councilmember	Bob Dunn	12/31/2019
Borough Manager	Joe Kauer	

IMPORTANT PHONE NUMBERS



Laughlin Memorial Library	724.266.3857
Veterans Admin—Ambridge Office	724.266.2558
Ambridge Water Authority	724.266.4847
Magistrate Hladio	724.770.2000
Property Tax Collector – Stacey Krol	724.266.3702
Social Security Office	866.331.6401
Ambridge Municipal Authority	724.266.7810
Representative Rob Matzie	724.266.7774
Wage & Business Tax Collector- Berkheimer	800.360.8989
Unemployment Office	724.269.1004
Ambridge Police Department “NON-EMERGENCY”	724.266.3270
Ambridge Fire Department “NON-EMERGENCY”	724.266.7926
EMERGENCY POLICE OR FIRE	DIAL 911

HIGHLIGHTS

THE FACADE IMPROVEMENT PROCESS

The program will offer up to \$20,000 per commercial occupied/available storefront address for an approximate expenditure of \$32,000.

The program will fund up to a maximum of \$6,500 for architect services.

The applicant must first pay for the work and provide proof of payment before the reimbursement is given.

The building must be located in the area designated for the FIP.

The whole process could take from six (6) months to one (1) year to complete.

All approved reimbursement grants are subject to availability of funds.

All projects must adhere to the FIP and design guidelines in addition to the Secretary of the Interior Standards.

Local and UCC code regulations are not superseded by the FIP Program guidelines.

All projects must conform to HUD requirements including prevailing wage, equal employment opportunity and other regulations.

Vacant storefronts must be occupied within 60 days of completion of the renovation.

A five-year mortgage at 0% interest, reduced by 10% each year, is placed on the building for the amount of the grant.

FOLLOW THESE STEPS FOR A SUCCESSFUL FACADE IMPROVEMENT PROJECT:

STEP 1: PRE-APPLICATION

⇒ Contact The Community Development Program at (724) 847-3889 for a pre-application packet which contains the program and design guidelines as well as other helpful information.

⇒ Submit your pre-application to your Local Revitalization Organization for approval. The contact person is listed on the cover letter that comes with your pre-application packet. If you do not own the building, the building owner must agree to the work and a five-year 0% interest mortgage on the building.

⇒ Do not do any work on your facade prior to receiving notice to proceed in writing from the Community Development Program.

STEP 2: FINAL DESIGN AND HISTORIC REVIEW

⇒ The final design and color selections must be approved by the Local Revitalization Organization. All projects must adhere to the FIP Design Guidelines provided with your pre-application packet.

⇒ Because the rebate grant is HUD funded, State Historic Review will be conducted if the building is over 50 years old. This process may take 2 months or more.

STEP 3: BIDS

⇒ Pre-bid meeting. The project manager will review the program requirements and bidding process with you. Bid packets will be made available which include the scope of work and drawings, prevailing wage rate, instructions and guidelines.

STEP 4: PRE-CONSTRUCTION

⇒ Once your contractor is chosen, a pre-construction conference is held. Your contractor must agree to abide by the federal prevailing wage rate, Equal Employment Opportunity, and other regulations which will be reviewed at the meeting.

⇒ The agreement is signed by you and the County Commissioners and is passed by resolution at their regular public meeting. You will need to enter into a contract with the contractor.

STEP 4: CONSTRUCTION AND DOCUMENTATION

⇒ After the contract is signed, you will receive written notice to proceed. Work can be started at this time. Most projects must be completed within 90 days. If the work completed does not comply with the scope of work in the agreement, the rebate will not be granted. The applicant must insure that all necessary documentation is submitted to the Community Development Program.

⇒ Periodic and final inspection of the work is done.

STEP 5: REIMBURSEMENT AND MORTGAGE

⇒ The reimbursement is processed. All necessary documentation must be submitted before the reimbursement is processed.

⇒ A mortgage in the amount of the reimbursement is filed against the property. This mortgage is 0% interest rate and is reduced 20% each year for five years until reduced to 0.

⇒ After five years, the mortgage may be satisfied. Call the Community Development Program for details.

RENOVATING YOUR STOREFRONT: GUIDELINES

- Original lines, proportions, features and materials should be retained.
- Repair rather than replace distinctive architectural features. New materials should match the original in composition, design and texture.
- Replace items that hide or detract from the historic character of the building with ones that enhance it.
- Some alterations over time are part of a building's history and should be maintained.
- Clean brick, wood and all surfaces using the gentlest means.
- Retain existing windows, doors, trim, decoration, and other details.
- Integrate upper floor facade in the design.
- The original roof shape should be kept.
- Canvas awnings are appropriate.
- Historic paint colors should be used to show the distinct character of the building.
- Construction materials should be appropriate to the historic storefront.
- Signs should be easy to read. A storefront should not have more than two signs. Plastic, back-lit signs can not be used. Single-lettering signs are appropriate.
- Consult the Design Guidelines for Commercial Building Facades in the pre-application packet for more information.
- Consult the Secretary of the Interior's Standards for Rehabilitation for more information.

To find out if your storefront is eligible for a facade renovation grant contact:

The Community Development

Program of Beaver

County

1013 Eighth Avenue
Beaver Falls, PA 15010
(724) 847-3889

Other Downtown Revitalization

Programs:

Main Street Architect Program - Renderings and/or drawings for rehabilitations of main street buildings.

Main Street Network - Information and staff support for local downtown revitalization organizations.

Streetscape - Improving the look of downtown commercial districts.

The Board of Beaver County Commissioners

Tony Amadio, Chairman
Joe Spanik
Dennis E. Nichols

FAÇADE IMPROVEMENT PROGRAM

Renovating your storefront can be exciting challenging. An inviting storefront attracts customers and enhances the downtown. Renovating a storefront takes time, focus money, but the final product of a good renovation will be well worth it.

The Facade Improvement Program (FIP) encourages building or business owners to renovate storefronts and receive reimbursement up to \$20,000 per commercial occupied/available storefront address.

Grants for facade renovations are also available for smaller projects such as signs, awning painting, etc.

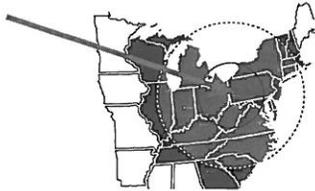
The project must be located within the designated downtown area and approved by the Facade Revitalization Organization of the town in which the building is located.

Participating downtowns:

- Alliquippa
- Ambridge
- Beaver
- Beaver Falls
- Bridgewater
- Freedom
- Midland
- Monaca
- New Brighton
- Rochester



HARMONY - AMBRIDGE Industrial-Commercial Corridor Resource



www.ambridgeboro.org | www.harmonytwp.com
info@ambridgeboro.org | harmonytwp@gmail.com

For a list of
{ Properties Available }
 please visit the following:

www.towncenter.info

www.pittsburghprospector.com

www.ambridgeregional.com

www.bridgespittsburgh.com

Economic Support For Growth:

Assistance Available	Harmony Township	Ambridge Borough	Contact
Tax Credit Programs	X	X	Beaver County Corp for Economic Development – 724.728.8610
HUB Zone		X	Ambridge Borough
LERTA Tax Abatement	X	X	Harmony Township Ambridge Borough
National Historic District Federal Tax Credits		X	Ambridge Borough
Façade Grant Assistance		X	Community Development Program of Beaver County – 724.847.3889 x.12
Financing Programs	X	X	Beaver County Corp for Economic Development – 724.728.8610
SBA Microloan Program	X	X	Washington County Council on Economic Development – 724.225.8223

Workforce Development and Human Resources:

Assistance Available	Brief Description	Contact Information
Aerotek Professional Staffing	Specializes in manufacturing, successfully used by several corridor-based industries	412.215.9793 Psantos@aerotek.com
Integrated Staffing Group	Local staffing agency www.integrativestaffing.com	888.563.8367
Penn State Beaver - Career Services	beaverpsu.edu bcsl6@psu.edu	724.773.3961
Geneva College	www.geneva.edu	724.846.5100
PA CareerLink Beaver County	jobgateway.pa.gov	724.728.4860
Beaver County Career & Technology Center	Career training in HVAC, Machine Tool Technology, Welding, Logistics, Plumbing & more.	724.728.5800
Job Training for Beaver County	Serves as a channel between the workforce & employers to meet the employment needs of the region.	724.728.2020
Community College of Beaver County	On-site development programs based on your needs; includes WEDnet Funding opportunities.	724.480.3443 john.goberish@ccbc.edu



Key Stakeholders: “Why we’re here . . .”

“The location has significant benefits due to its proximity to major transportation access including the interstate and turnpike. Also, the proximity of Ambridge to major industrial suppliers is a major contributor to success.”
 - James, Beverage Manufacturer

“The proximity to transportation routes and local steel mills that we purchase materials.”
 - Ryerson

“In the terminal business, location is everything. We compete with many locations successfully.”
 - Port Ambridge

“As a start-up manufacturing & distribution center, PittMoss needed a location providing easy access to labor, trucking, suppliers and technical support for onsite equipment. Ambridge has provided the necessary access, as well as networking support through the local township.”
 - Erika Weaver, Dir. Of Finance & Administration, PittMos, LLC

BOROUGH OF AMBRIDGE

YOUR QUICK GUIDE FOR STARTING A NEW BUSINESS

Depending on the type of business you intend to open, there are permits and licenses that you need to secure prior to opening. Please review the various stages of the permitting process below as it will walk you through what is actually needed for you to open for business.

ALL BUSINESSES REQUIRE A COMMERCIAL OCCUPANCY PERMIT

- Permit Fee - \$200 (For Local Entrepreneurs whose goal is to open or re-open a store front in an existing structure that requires minimal improvements in order to achieve compliance with state requirements.)
 - Above 1,500 SF, or if this is new construction, or if the structure needs significant improvements, \$0.40 to \$0.25 per square foot permit fee.
- Follow the Commercial Occupancy Permit instructions carefully, once ready to submit, return the completed application packet along with the required drawings to the Borough Office.
- Your permit application and plans will first be reviewed in house by the Code Enforcement Officer for confirmation to Zoning, Flood Plain Management and Historical District criteria. After that, the plans will be provided to the Borough's Building Code Official, NIRA Engineers for plan review relative to the State's Uniform Construction Code. NIRA will provide the applicant with a detailed plan review letter and note any additional code requirements that your project may require. If your drawings meet code, a notice to proceed will be granted to you so that you can make the necessary improvements.
 - Should your work require construction, a separate building permit may be necessary.
- Once all improvements are completed, an Occupancy Inspection is necessary; inspection fee is a minimum \$85/hour (1 hour minimum payable directly to NIRA Engineers).
- Business Tax – be sure to register your business with the Borough's Act 511 Tax Collector, Berkheimer by calling 1-800-360-8989.

ARE YOU ADDING SIGNAGE? IF SO, A SEPARATE SIGN PERMIT APPLICATION IS NEEDED

- Permit Fee - \$29 + (\$53 for a sign cost that is between \$0 to \$5,000 or \$78.75 if the sign value is over \$5,000)
 - Submit a completed application along with payment to the Borough Office, do not install or erect your signs until you have received permit approval from the Code Enforcement Officer.

ARE YOU OPENING A RESTAURANT, TAVERN, EATING OR DRINKING ESTABLISHMENT OR FACILITY THAT SERVES FOOD / MEALS? IF SO, A HEALTH LICENSE IS NEEDED.

- Permit Fee - \$300 (New Registration Fee) Pay at the time submitting a completed application. Once your application is received and you have completed all of the necessary improvements as part of your Commercial Occupancy process, please schedule for the Borough's Health Officer to inspect your establishment. Appointments can be made by calling the Borough Office at 724-266-4070. You cannot open your food related establishment without securing a passing health inspection and issuance of your health license.
- If a State Liquor License is needed contact the PA Liquor Control Board at 412-723-0100.

IS YOUR NEW BUSINESS LOCATED WITHIN THE AMBRIDGE HISTORICAL DISTRICT? The Old Economy Historic District / Ambridge Historic District is located between 12th Street and 16th Street, from Route 65 to one block east of Merchant Street. If so, your application for Occupancy, Zoning and Construction Permits will require approval from the Borough's Historical Architectural Review Board (HARB).

- Fee - \$0
- The HARB will ensure that your business use confirms to the Borough's Zoning Ordinance and Historical Preservation Plans.

Should you have any questions during the process of making application, please contact Joe Kauer, Ambridge Borough Manager at 724-266-4070 or jmkauer@ambridgeboro.org



BOROUGH OF AMBRIDGE
600 Eleventh Street
Ambridge, PA 15003
Phone: (724) 266-4070
FAX: (724) 266-9191
www.ambridgeboro.org

COMMERCIAL OCCUPANCY PERMIT APPLICATION

PERMIT INSTRUCTIONS

All information is required under the Commonwealth of Pennsylvania Uniform Construction Code, Act No. 45 of 1999.

- 1) Application for occupancy, plan examination / building permit, worker's compensation addendum, O.S.H.A. safety standards signoff, and zoning, historic district and flood hazard signoff shall be completed and returned to the Borough Office along with the required plans for the application to be processed.
- 2) Commercial applicants: Three (3) sets of building plans and / or specifications are to be submitted with the application. Commercial drawings must be sealed by a Pennsylvania registered design professional and will be subject to a code compliance plan review.
- 3) Where applicable and requested by the Borough, a site plan (survey) shall be submitted with the application.
- 4) The Borough **MUST** approve the Zoning, Historical District and Flood Hazard Form. Plan review for construction permits will not proceed until these approvals have been granted by the Borough.

###



BOROUGH OF AMBRIDGE

DEPARTMENT OF CODE ENFORCEMENT

600 11th Street
Ambridge, PA 15003-2377

Office: 724-266-4070

FAX: 724-266-9191

E-mail: codes@ambridgeboro.org

COMMERCIAL OCCUPANCY PERMIT INFORMATION

****NOTE: YOU MUST CONTACT THIS OFFICE FOR A FINAL OCCUPANCY INSPECTION UPON COMPLETION OF ANY WORK/RENOVATION AND PRIOR TO OCCUPANCY**
PLEASE COMPLETE ALL INFORMATION IN ITS ENTIRETY**

DATE: _____

PROPERTY ADDRESS: _____

TAX PARCEL NUMBER: _____

PROPERTY OWNER INFORMATION

Name: _____ Phone No.: _____

Company: _____

Address: _____

Bldg Manager: _____ Phone No.: _____

Address: _____

OCCUPANT INFORMATION

Type of Business: _____

Name of Business: _____ Business Phone: _____

Projected Opening/Start Date: _____

Business Owner: _____ Business Owner's Phone: _____

List all employees who will be working at this location (use back of sheet for additional employees):

<u>Name</u>	<u>Mailing Address</u>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Total Number of Employees: _____

----- FOR BOROUGH USE -----

DATE RECEIVED: _____ AMOUNT RECEIVED: _____ CHECK NO: _____ CASH

RECEIVED BY BOROUGH OFFICE: _____



BOROUGH OF AMBRIDGE

DEPARTMENT OF ZONING

600 11th Street
Ambridge, PA 15003-2377
Office: 724-266-4070
FAX: 724-266-9191
E-mail: codes@ambridgeboro.org

ZONING, HISTORIC DISTRICT AND FLOOD HAZARD SIGNOFF

Location of Property

Address: _____ Date: _____

Parcel Number: _____ Zoning District: _____

Current Property Owner Information:

Name: _____ Phone No.: _____

Company: _____ Phone No.: _____

Address: _____

? ZONING AND/OR HISTORICAL DISTRICT COMPLIANCE CERTIFICATES WILL BE ACCEPTED IN LIEU OF THIS FORM.

? APPLICANT/OWNER IS RESPONSIBLE FOR OBTAINING REQUIRED HIGHWAY OCCUPANCY PERMITS FROM THE PA DEPARTMENT OF TRANSPORTATION AS REQUIRED UNDER SECTION 402 OF THE STATE HIGHWAY LAW (36 P.S. §670-420, AS WELL AS COMPLIANCE WITH THE REQUIREMENTS OF THE BOROUGH SEWER AND WATER AUTHORITIES, WHETHER SPECIFIED OR NOT.

FOR BOROUGH USE ONLY

ZONING SIGNOFF

APPROVED DOES NOT APPLY

comments: _____

HISTORICAL DISTRICT SIGNOFF

APPROVED DOES NOT APPLY

comments: _____

FLOOD HAZARD AREA

YES NO
IF YES COMPLIANCE WITH §403.62A(D)(1)(2)(3) IS REQUIRED

comments: _____

Authorized by: _____, ZONING OFFICER Date: _____



BOROUGH OF AMBRIDGE

Department of Zoning & Code Enforcement

600 Eleventh Street
Ambridge, PA 15003-2377
(724) 266-4070
FAX: (724) 266-9191
codes@ambridgeboro.org

WORKER'S COMPENSATION ADDENDUM

LOCATION OF PROPERTY: _____

PARCEL NUMBER: _____

PART I

The applicant for the building permit, in compliance with Act 44 of 1993, hereby submits (check one):

- Certificate of Insurance OR Certificate of Self-Insurance (please attach)
- Affidavit of Exemption

PART II

Basis for exemption (check one):

- Applicant is an individual who owns the property
- Contractor/Applicant is a sole proprietorship without employees
- Contractor/Applicant is a corporation, and the only employees working on the project have and are qualified as "Executive Employees" under Section 104 of the Workers' Compensation Act.

Please explain: _____

- All of the contractor/applicant's employees on the project are exempt on religious grounds under Section 304.2 of the Workers' Compensation Act.

Please explain: _____

- Other: Please explain: _____

My signature on behalf of or as the contractor/applicant for this building permit constitutes my verification that the statement contained here are true, and that I am subject to the penalty of 18 PA C.S.A §4904 relating to un-sworn falsifications to authorities.

Signature of Applicant/Owner/Contractor

Title

Date Signed

1 Any subcontractor used on this project will be required to carry their own workers' compensation coverage.
 2 The applicant is not permitted to employ any individual to perform work on this project pursuant to the permit in violation of the Act.
 3 Violation of the Workers' Compensation Act or the terms of this permit will subject the applicant to a stop-work order & other fines & penalties provided by law.



BOROUGH OF AMBRIDGE

Department of Zoning & Code Enforcement

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Ambridge, PA 15003-2377
(724) 266-4070
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codes@ambridgeboro.org

O.S.H.A SAFETY STANDARDS SIGNOFF

LOCATION OF PROPERTY: _____

PARCEL NUMBER: _____

*I AM FULLY AWARE OF THE U.S. DEPARTMENT OF LABOR, OCCUPATION
SAFETY AND HEALTH ADMINISTRATION (OSHA) STANDARDS AND
UNDERSTAND THAT I MUST COMPLY WITH THESE STANDARDS FOR THE
DURATION OF MY CONSTRUCTION/DEMOLITION PROJECT.*

Signature of Applicant/Owner/Contractor

Title

Date Signed

APPLICATION FOR PLAN EXAMINATION AND BUILDING PERMIT

Commercial building permit

Residential building permit

Temporary use permit

Commercial Occupancy Permit _____

*Project Address City, State, Zip Tax id # Subdivision Lot# Block # Zoning District

*Applicant name (print) Applicant phone & E-mail Applicant mailing address (print)

*Property owners name (print) Owners phone & E-mail Property owners mailing address (print)

*Design Professionals name (print) Designers phone and E-mail Designers mailing address (print)

*General Contractors name (print) GC's phone & E-mail GC's mailing address (print)

*Approx. cost of project: _____

*Description of project (new const., addition, alteration, repair, footing/foundation only, temporary use, etc.)
(* Attach all completed documents with drawings and submit directly to the Municipality*)

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/her authorized agent and I/we agree to conform to all applicable laws of this jurisdiction. I understand a minimum of three (3) sets of drawings/plans are required for processing. Application is not valid and cannot be processed without signature below.

- A permit will not be issued without Municipal Zoning approval.
- A permit will not be issued without receipt of permit fee paid to the Municipality.
- Home improvement contractors are required to demonstrate registry with the PA Attorney's office to the Municipality.
- Contractors performing asbestos and/or lead abatement or removal must be certified by the Pa Dept of Labor and Industry.

Applicant Signature

Print name

Date

NIRA Consulting Engineers is a Certified Third Party Agency as per the requirements of the Pennsylvania Uniform Construction Code.





BOROUGH OF AMBRIDGE
600 Eleventh Street
Ambridge, PA 15003
Phone: (724) 266-4070
FAX: (724) 266-9191
www.ambridgeboro.org

COMMERCIAL OCCUPANCY PERMIT APPLICATION

SUPPLEMENTAL INFORMATION

(Please keep this section for your reference – no need to return with application)

- 1) Fee Structure / Schedules**

- 2) NIRA Engineers / The Uniform Construction Code of the Commonwealth of Pennsylvania – Frequently Asked Questions Guide**

###

**NIRA CONSULTING ENGINEERS, INC.
PA UNIFORM CONSTRUCTION CODE
COMMERCIAL PLAN REVIEW FEES
for
CHANGE OF OCCUPANCY
to
AN EXISTING STORE-FRONT**

Note: This special program is intended for use by local entrepreneurs whose goal is to open or re-open a store front in an existing structure that requires minimal improvements in order to achieve compliance with state requirements.

Plan review fees (limited to (2) two 24x36 drawing pages for a project of approximately 1,500sq ft on one floor)

<i>due at the time of application (non-refundable)</i>	<i>\$196.00</i>
<i>state education fund</i>	<i>\$4.00</i>
<i>total</i>	<i>\$200.00</i>

The completed application is to include three (3) sets of sealed/signed drawings from a registered design professional and be given to the Borough office staff for processing.

Any improvements made to the project beyond the scope of the original approved submittals may require additional permit applications and professional drawings.

**NIRA CONSULTING ENGINEERS, INC.
PA UNIFORM CONSTRUCTION CODE
COMMERCIAL CONSTRUCTION PERMIT AND INSPECTION FEE SCHEDULE
for**

CHANGE OF OCCUPANCY

to

AN EXISTING STORE-FRONT

Note: This special program is intended for use by local entrepreneurs whose goal is to open or re-open a store front in an existing structure that requires minimal improvements in order to achieve compliance with state requirements.

Occupancy inspections (1 hour minimum) \$85.00/hour

The applicant is responsible for completion of all improvements indicated on the approved drawings. Any deficiencies found during inspection will require the applicant to effect repair and schedule additional inspections.

The applicant shall be responsible for repair of any damage, defective parts, and hazardous conditions that are found to exist at the time of final inspection.

Any improvements made to the project beyond the scope of the original approved submittals may require additional permit applications and professional drawings.

NIRA CONSULTING ENGINEERS, INC.
PA UNIFORM CONSTRUCTION CODE
COMMERCIAL CONSTRUCTION PERMIT AND INSPECTION FEE SCHEDULE
Fee Per Square Foot of Construction (Gross Aggregate)^{1, 2, 6}

Group	Description	Fee Per Square Foot
A-1	Assembly, theaters with stage	.40
	Assembly, theaters without stage	.40
A-2	Assembly, nightclubs	.40
	Assembly, restaurants, bars, banquet halls	.40
A-3	Assembly, churches	.40
	Assembly, general, community halls, libraries, museums	.40
A-4	Assembly, arenas	.40
B	Business	.40
E	Education	.40
F-1	Factory and Industrial, moderate hazard	.30
F-2	Factory and Industrial, low hazard	.30
H-1	High Hazard, explosives	.50
H-2 through H-4	High Hazard	.50
H-5	Hazardous Production	.50
I-1	Institutional, supervised environment	.40
I-2	Institutional, incapacitated	.40
I-3	Institutional, restrained	.40
I-4	Institutional, day care	.40
M	Mercantile	.40
R-1	Residential, hotels	.40
R-2	Residential, multiple family	.40
R-3 ^{3, 4, 5}	Residential, one & two family	.40
R-4	Residential, care/assisted living	.40
S-1	Storage, moderate hazard	.30
S-2	Storage, low hazard	.25
U ^{5, 8, 9}	Utility, miscellaneous > 350 sq. ft.	.25
All Groups – field consultations and misc builder requested inspections		hourly

¹ For performing Mechanical, Plumbing, Electrical, Fuel Gas, Energy Conservation, or Fire Protection Inspections add 20% to the above fees for each trade.

² Permit fees may increase or decrease subject to degree of construction complexity, completeness and number of trips to job site required. Applicant will be advised of permit cost after review of Permit Application.

³ Square footage for residential one & two family dwellings shall be calculated based upon maximum building footprint.

⁴ Manufactured (HUD) homes & mobile homes shall be inspected for a flat fee of \$350.00

⁵ Decks, porches, roof replacement, etc. accessory to one and two family dwellings shall be inspected for a flat fee of \$85.00

⁶ Minimum Construction Permit and Inspection Fees

a. New Construction (Minimum Fee)

\$300.00

b. Miscellaneous Alterations/Additions/Repairs (Minimum Fee)

\$250.00

⁷ A 20% Municipal Administration Fee will be added to the General Permit Fee. (Commercial only.)

⁸ In ground pools including electric (Minimum Fee)

\$250.00

⁹ Above ground pools including electric (Minimum Fee)

\$175.00



950 Fifth Avenue, Coraopolis, PA 15108, (412) 262-3970 Phone, (412) 262-1938 Fax

The Uniform Construction Code of the Commonwealth of Pennsylvania and your new business.

§ 403.42. Permit requirements and exemptions.

- (a) An owner or authorized agent who intends to construct, enlarge, alter, repair, move, demolish or change the occupancy of a commercial building, structure and facility or to erect, install, enlarge, alter, repair, remove, convert or replace any electrical, gas, mechanical, or plumbing system regulated by the Uniform Construction Code shall first apply to the Building Code Official and obtain the required Permit under § 403.42a (relating to Permit Application).

Q: What does this mean?

A: Essentially, if you want to open a business in an existing building or build a new structure for your business, the Commonwealth of Pennsylvania requires you obtain a Permit to Construct, followed by a Permit to Occupy.

Q: But I am not really building anything. I am just moving in and stocking the shelves - I do not need a Permit to 'Construct.'

A: 'Construction Permit' is a generic term, and is a required step in the process - call it a 'Permission Permit' if that helps.

Q: How/what is required in order to get a 'Construction-Permission Permit?'

A: The first and safest step is to hire a Design Professional, who is licensed in the Commonwealth of Pennsylvania, to provide you with the required Drawings. The Drawings will accompany your Application to the Municipality to begin the process.

Q: Drawings? Like I said, I am just moving in and stocking the shelves. Why do I need Drawings?

A: § 403.42a Permit application.

(c) **A licensed architect or licensed professional engineer shall prepare the construction documents under the Architects Licensure Law (63 P. S. §§ 34.1-34.22), or the Engineer, Land Surveyor and Geologist Registration Law (63 P. S. §§ 148-158.2). An unlicensed person may prepare design documents for the remodeling or alteration of a building if there is no compensation and the remodeling or alteration does not relate to additions to the building or changes to the building's structure or means of egress.**

The Uniform Construction Code requires a Registered Design Professional be the responsible party for the ultimate occupancy of the business. This step is critical for your safety, the safety of your present and future employees and the safety of your patrons. Your insurance coverage may be dependent on following this process.

Q: What sort of information will be included on the Drawings that require a Professionals input?

A: The Design Professional will accurately answer the requirements of the Uniform Construction Code including, structural changes, occupancy limits (number of people), emergency egress paths and exits, fire separation from other occupancy's in the same building, as well as adjacent buildings. In addition, the Design Professional will consider matters of a more personal nature including bathrooms, temperature control and accessibility considerations for handicapped persons-all of which are required by the Uniform Construction Code.

Q: What is the next step after I have Professional Drawings completed and submitted with my Application for Construction-Permission?

A: The Municipal staff will review your Application for zoning and other local requirements then forward your Application to the approved agency for Plan Review. Once the Application and Drawings have been approved by NIRA Consulting Engineers, Inc., the Applicant will pay the Permit Fee and receive the 'Construction-Permission' Permit. At that point, the Applicant is required to have the space prepared according to the Approved Plans.

Q: When can I move in?

A: The Applicant will schedule an inspection with NIRA Consulting Engineers, Inc. once the space has been prepared according to the Approved Plans. Once the space has been inspected and declared compliant by the approved agency, you will be issued an Occupancy Permit.



■ Construction documents required ■

As per the requirements of § 403.42a of the Pennsylvania Uniform Construction Code, all applications relevant to commercial construction, projects shall be accompanied by three (3) sets of sealed and signed documents from a registered design professional.

As per the requirements of the Pennsylvania Licensure Law, the first page of each set of three sets shall include an original seal and signature of the design professional and subsequent pages of each set may include a facsimile of the seal and signature.

Each of the three (3) sets of drawings shall include specifications that indicate the code by which the plans are to be reviewed, as well as code compliance for all the proposed work including but not limited to the following trades/disciplines:

- Architectural
- Structural
- Mechanical
- Electrical
- Plumbing
- Fire systems
- Fuel gas systems
- Energy compliance
- Accessibility



NIRA CONSULTING ENGINEERS, INC.
PA UNIFORM CONSTRUCTION CODE
GENERAL CONSTRUCTION PERMIT AND INSPECTION FEE SCHEDULE
Fee Per Square Foot of Construction (Gross Aggregate)^{1,2,6}

RESIDENTIAL CONSTRUCTION PERMIT FEES

EXHIBIT "A"

Group	Description	Fee Per Square Foot
R-2	Residential, multiple family	.40
R-3 ^{3,4,5}	Residential, one & two family	.40
S-1	Storage, moderate hazard	.30
S-2	Storage, low hazard	.25
U ^{5,8,9}	Utility, miscellaneous > 350 sq. ft.	.25
All groups – field consultations and misc builder requested inspections		hourly

Alterations and Additions	.40/sq. ft.
Accessory Structure – with foundation	175.00
Accessory Structure – without foundation	85.00
Accessory Structure Demolition Permit	50.00
Residential Demolition Permit	100.00

- ¹ For performing Mechanical, Plumbing, Electrical, Energy, Fuel Gas or Fire Protection Inspections add 20% to the above fees for each trade.
- ² Permit fees may increase or decrease subject to degree of construction complexity, completeness and number of trips to job site required. Applicant will be advised of permit cost after review of Permit Application.
- ³ Square footage for residential one & two family dwellings shall be calculated based upon maximum building footprint.
- ⁴ Manufactured (HUD) homes and mobile homes shall be inspected for a flat fee of \$350.00
- ⁵ Decks, porches, roof replacement, etc. accessory to one and two family dwellings shall be inspected for a flat fee of \$85.00
- ⁶ Minimum Construction Permit and Inspection Fees
- | | |
|--|----------|
| a. New Construction (Minimum Fee) | \$250.00 |
| b. Miscellaneous Alterations/Additions/Repairs (Minimum Fee) | \$175.00 |
- ⁸ In ground pools including electric (Minimum Fee) \$250.00
- ⁹ Above ground pools including electric (Minimum Fee) \$175.00



NIRA CONSULTING ENGINEERS, INC.
PA UNIFORM CONSTRUCTION CODE
COMMERCIAL PLAN REVIEW FEES

The following rates for UCC Plan Review are fees charged by NIRA Engineers. These fees will be paid by the applicant to the Municipality. All plan review applications are available at the Municipal Office or at the offices of NIRA Consulting Engineers. Additional filing fees may be assessed by the Municipality at their option.

All initial commercial reviews will be completed within twenty-five (25) business days from receipt of the Permit Application. All initial residential reviews will be completed within fifteen (15) business days from receipt of the Permit Application.

Compliance with the PA Uniform Construction Code
New Construction, Renovations and/or Additions General For Construction Plan Review Fees
Includes Accessibility Review

Use Groups "B", "E", "M", "R-1", "R-2", "R-3".....	\$.20/square foot (up to 15,000 s.f.) See Note 4, 5
Plus.....	\$.10/square foot (15,001 s.f. up to Total s.f.) See Note 4, 5
Use Groups "A", "F", "H", & "I".....	\$.25/square foot (up to 12,000 s.f.) See Note 4, 5
Plus.....	\$.12/square foot (12,001 s.f. up to Total s.f.) See Note 4, 5
Use Groups "S", "U"	\$.20/square foot (up to 12,000 s.f.) See Note 4, 5
Plus.....	\$.10/square foot (12,001 s.f. up to Total s.f.) See Note 4, 5

1. Review fees reflect an initial plan review & review of one subsequent revision. Any additional required reviews will be conducted at 50% of the original review cost. (Commercial Only)
2. Square footage shall include the aggregate sum of each floor level of new constructions, additions, or renovations including porches, attics, storage, mechanical areas, breezeways, etc.
3. Residential (One and Two Family Dwellings) New Construction Minimum Fee.....\$250.00
 Additions and alterations (Minimum Fee).....\$250.00
4. Miscellaneous (Commercial Only) Plan Reviews
 - a. New Construction (Minimum Fee)
 - b. Alterations/Repairs (Minimum Fee) \$250.00
 - c. Stand alone Mechanical, Plumbing, Electrical & Fire Protection \$250.00
 - d. Preliminary Review and Consultation (Height & Area & Type of Construction) Hourly Rate
5. For each Mechanical, Electrical, Plumbing, Fire Protection, Energy Conservation or Fuel Gas Plan Review, Add 20% to General Construction Plan Review Fee.
6. Review fees may increase or decrease subject to degree of construction complexity, completeness and detail of drawings. Applicant will be advised of plan review cost after review of Permit Application and before start of review.
7. A 20% surcharge on the General plan review fee will be added for Municipal Administrative Costs.
8. All permits add \$4.00 UCC fee.

-
- "A" Assembly Use Groups. This includes assembly occupancies. This is further designated as particular use groups including: A-1 Theaters and rooms with stages; A-2 restaurants & nightclubs where alcohol is served; A-3 places of worship and lecture halls where alcohol is not predominately served; A-4 viewing of indoor sporting events; A-5 outdoor sporting events.
 - "B" Business Use. This includes office buildings, outpatient medical facilities, dry cleaning, professional business, etc.
 - "E" Education Use. Building where education is provided including schools, certain daycares & vocational training.
 - "F" Factory Use. Buildings where production occurs.
 - "H" Hazardous Use. Buildings where hazardous materials are manufactured, stored or used in production.
 - "I" Institutional Uses. Includes hospitals, rehab facilities, prisons, etc.
 - "M" Mercantile Uses. This includes buildings where the display of goods are sold.
 - "R" Residential Uses. This includes building where persons reside and sleep. Further designated as: R-1 hotels/motels; R-2 non-transient occupants i.e. dormitories, boarding houses; R-3 are multi-family residences; R-4 single family and townhouses.
 - "S" Storage Buildings
 - "U" Utility buildings. This includes accessory structures, garages, barns.

**NIRA CONSULTING ENGINEERS, INC.
RESIDENTIAL PLAN REVIEW FEES**

Preliminary Review Fee is 25% of the construction document review fee. This fee is credited to final construction document review fee.

Construction document review fee is based upon the Occupancy Classification and gross square footage. Review fees are for New Construction and Additions and Alterations.

IBC Occupancy Classification-General Constr.
"S" & "U" & R3 (one and two family dwelling)

Fee

Up to and including 12,000 sq. ft. = \$.20/sq.ft.
Greater than 12,000 sq. ft. = \$2400 + \$.10/sq.ft.

Minimum Fee: \$250.00

"R-3" (one & two family dwellings)
Additions, Alterations and Repairs

Minimum Fee: \$125.00

NOTES:

1. For each Mechanical, Electrical, Plumbing, Fire Protection, Energy or Fuel Gas Plan Review, Add 20% to the Above General Construction Plan Review Fee.
2. Review fees may increase or decrease subject to the degree of construction complexity, completeness and detail of construction.
3. All permits add UCC fee of \$4.00. (Surcharge for PA Dept of Continuing Education)





BOROUGH OF AMBRIDGE

DEPARTMENT OF CODE ENFORCEMENT

600 11th Street
 Ambridge, PA 15003-2377
 Office: 724-266-4070
 FAX: 724-266-9191
 E-mail: codes@ambridgeboro.org

APPLICATION FOR SIGN PERMIT

Applicant Information:

Name: _____ Date: _____
 Company: _____
 Address: _____ Phone No.: _____
 Proprietary Interests: _____ Phone No.: _____

Location Information:

Location of Sign: _____ Zoning Dist: _____
 Tax Parcel Number: _____

Sign Specifications:

Number of Signs: _____
 Type of Sign: Wall Permanent Temporary
 Projecting Free-Standing Billboard
 Dimensions: width: _____ height: _____
 Clearances (as applicable): _____
 Total Cost of Sign: _____ Construction/Description/Design of Sign: _____

I hereby certify that the above information is true and correct to the best of my knowledge.

 Signature of Applicant _____ Date _____

ANY PERSON AGGRIEVED BY THE DECISION OF THE ZONING OFFICER MAY REQUEST A HEARING BY THE ZONING HEARING BOARD. THE PERSON SHALL WITHIN THIRTY (30) DAYS OF RECEIPT OF THE DECISION OF THE ZONING OFFICER FILE AN APPEAL FOR A HEARING BY THE ZONING HEARING BOARD WITH THE ZONING OFFICER.

FOR OFFICE USE

Sign Permit for Use Was: Approved Denied - Not in conformance with Article _____, Section _____ of the Borough of Ambridge

Zoning Ordinance for the following reasons: _____

Sign Permit Fee Amount:	_____
Education Fee	\$ 4.00
Zoning Permit Fee Amount:	\$ 25.00
TOTAL	_____

 Zoning Officer _____ Date Approved _____ Sign Permit Number _____

PROVIDE SIGN & FOOTER SPECIFICATIONS
AND CUT SHEETS OF SIGN

STREET NAME _____

STREET NAME _____

STREET NAME _____

STREET NAME _____

SIGN PLAN

Name _____

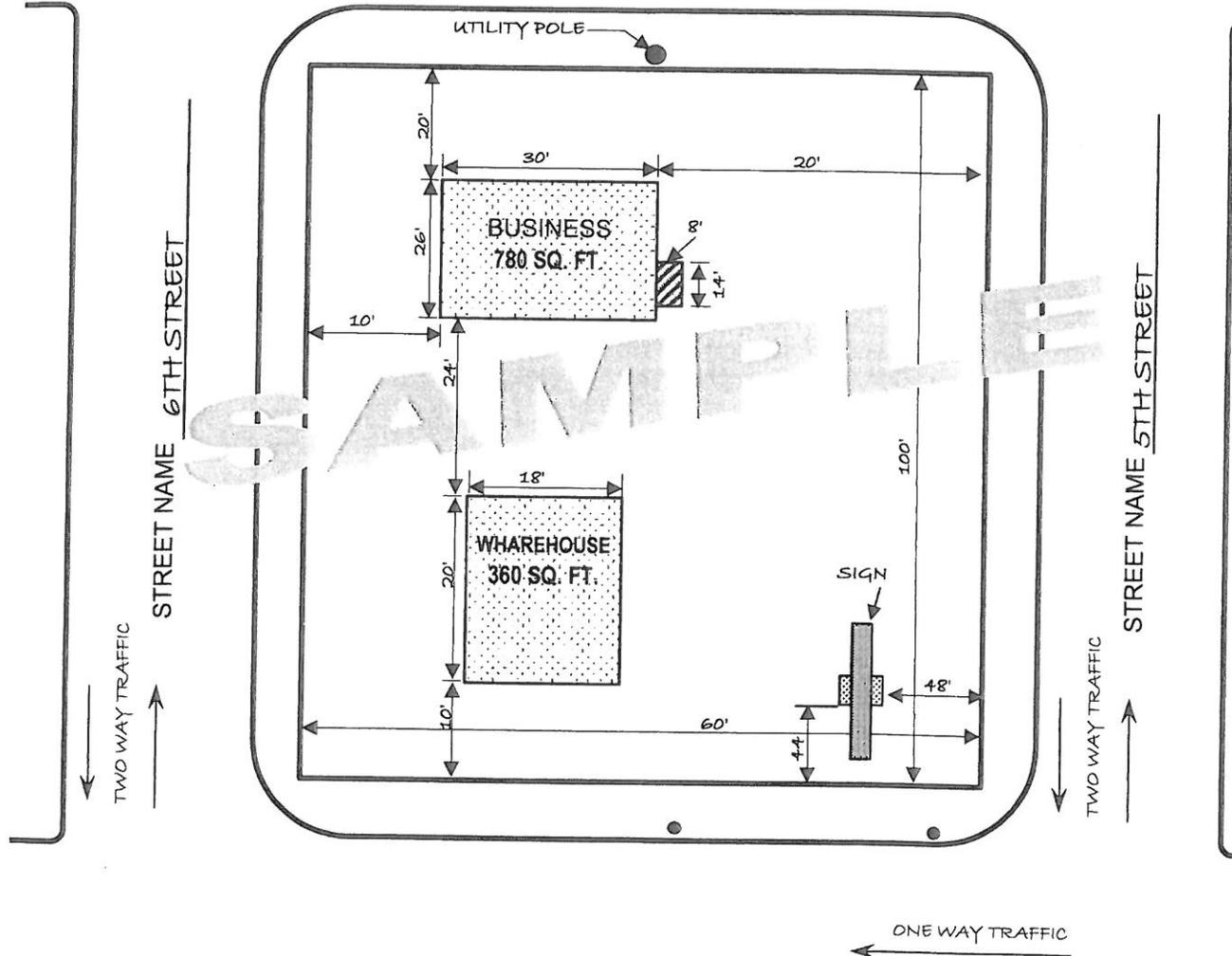
Address _____

Parcel # _____ Zoning District _____ Date _____

PROVIDE SIGN & FOOTER SPECIFICATIONS
AND CUT SHEETS OF SIGN

ONE WAY TRAFFIC

STREET NAME ALLEY



STREET NAME MAPLEWOOD AVENUE

SIGN PERMIT SAMPLE PLAN

Name _____

Address _____

Parcel # _____ Zoning District _____ Date _____

20 _____

AMBRIDGE BOROUGH

HEALTH DEPARTMENT

Application For Health License

Fee\$ _____	Ck # _____
Date Paid _____	
License # _____	

Today's Date: _____

Name of Business: _____

Applicant Name: _____

Applicant Home Address: _____

Phone #'s –
Home: _____ Business: _____ Cell: _____

Business Physical address:	Business Mailing Address:
_____	_____
_____	_____
_____	_____

PA Operators License Number : _____

Description of food services to be rendered: _____

If using a flame to cook, applicant must make application with the fire safety officer.

In consideration of such license, I hereby agree at all times to conduct the said premises in conformance with the purposes, intent, and provision of the Food Handling Establishment Ordinance, and other ordinances of the Health Department, the amendments and supplement thereto, other ordinances of the municipality and statutory laws of the State of Pennsylvania to the conduct of such businesses.

NO LICENSE SHALL BE TRANSFERABLE. Licenses may be suspended or revoked by the Health Department upon violation of the purposes, intent and provision of the Food Handling Establishment Ordinance and other ordinances of the Health Department, other ordinance of the municipality and statutory laws of the State of Pennsylvania relating to the conduct of such business.

Signature of applicant Date



Restaurant Self-Inspection Checklist

Policy #:

Date:

Location Address:

A vital part of loss control is the recognition and removal or correction of unsafe activities or conditions before a loss occurs. This checklist provides you with a tool to identify some areas that might need attention. A "NO" response to any question indicates corrective action may be necessary. This survey form should be completed at least quarterly, and reviewed by the various levels of management to assure that unsafe acts/conditions are corrected and follow-ups are scheduled to see if the correction(s) accomplishes its purpose. Additional measures may be required beyond those identified by this checklist.

Restaurant and Food Operations:

- | | Yes | No | N/A |
|--|--------------------------|--------------------------|--------------------------|
| 1) Kitchen waste materials stored in metal containers with tight-fitting lids, kept in designated areas and removed by carts to compactor or dumpster? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Operable automatic dry-chemical extinguishing system in hood and duct above ranges, grills and fat fryers? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Extinguishing heads capped to prevent a cooking buildup? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4) Extinguishing system's manual pull switches located away from cooking equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5) Extinguishing system(s) has a semi-annual service contract with qualified firm? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6) Fuel supply for cooking equipment has an automatic shut-off valve when extinguishing system activates? .. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7) Deep-fat fryer units controlled and provided with high-temperature shut-offs; overflow gutters provided? .. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8) Filters in exhaust system(s) cleaned at least daily? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9) Exhaust system(s) cleaned at least quarterly by qualified service contractor? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10) Floors adjacent to deep-fat fryers dry and free of grease? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11) Floors adjacent to soft-drink syrup tanks cleaned regularly? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12) Floors around sink mopped dry? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13) Knives placed in sheaths when not in use? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14) Proper guards in place and used with meat-slicing machines? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Food Handling Practices:

- | | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 1) Perishable or potentially hazardous foods properly stored and held at the correct temperature? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Cutting boards washed and sanitized whenever the use switches between raw food and cooked or ready-to-serve food? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Employees wash hands after wiping tables and bussing soiled dishes, before handling place-settings and serving food? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Fire Protection and Prevention:

Fire Extinguishers

- | | Yes | No | N/A |
|---|--------------------------|--------------------------|--------------------------|
| 1) Proper number and type(s) of fire extinguishers, charged and tagged to show last service date? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2) Fire extinguishers properly wall-mounted, identified and adequately accessible for hazard involved? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3) Employees trained in proper use of extinguishers and manual operation of dry-chemical system protecting cooking equipment? | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

	Yes	No	N/A
<i>Sprinklers</i>			
4) Sprinkler system control valves secured in open position?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Minimum of 18 inches clearance between stock storage and sprinkler heads?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Clear space of three feet around sprinkler system's main control valve?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7) Water pressure indicated on sprinkler system's lower gauge?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8) Sprinkler system(s) periodically tested and maintained; written records kept on premises?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>General Fire Safety</i>			
9) Employees instructed in evacuation procedures for both customers and employees?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10) Instructions prominently posted for reporting fire and calling Fire Department?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11) Flammable and combustible liquids (paints, solvents, etc.) stored in metal safety cabinets or off premises?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12) Storage of combustibles not permitted within 30 feet of boilers, furnaces or other heat source?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Electrical Equipment:			
	Yes	No	N/A
1) All electrical equipment properly grounded, portable electrical equipment and extension cords have a ground prong?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Breaker switches properly marked?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Electrical panel boxes have doors closed, clear area of 30 inches in front of boxes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Switches, switch boxes, outlets and wiring inspected periodically and deficiencies corrected?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Storage Areas:			
	Yes	No	N/A
1) Stock properly and securely stacked; stored on racks, shelves or pallets?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Good housekeeping maintained, aisles clear, storage room orderly, floors free of debris, storage has proper clearances from hot-water heater and sprinklers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Shelving and racks in good repair and secured to avoid tipping?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cold-storage and Refrigeration Equipment			
	Yes	No	N/A
1) Refrigeration and air-conditioning compressors clean, well ventilated, kept clear of combustibles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Walk-in cooler and freezer doors provided with operable interior-release mechanisms, alarm system, and axe?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) When restocking, new stock placed at rear and old stock moved up front for use first?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Recommended holding times for food followed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Floors and Walking Surfaces			
	Yes	No	N/A
1) Floor free from food spillage, silverware, broken glassware, loose mats, torn carpets or other hazards? ..	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Portable signs indicate wet-mopped floors or temporary hazards?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Stair treads equipped with abrasive strips or other nonskid surface?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Outdoor walkways checked frequently for, tripping hazards; repairs made promptly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5) Indoor-outdoor carpeting or other type of mat provided at entrance doors in inclement weather?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6) Changes in interior elevations properly illuminated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exits			
	Yes	No	N/A
1) Exits properly marked, illuminated and unobstructed; doors kept unlocked during hours of operation or equipped with panic bars?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Non-exit doors (to rest room area, kitchen, closets, etc.) identified properly?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Secure handrails on all stairs and steps?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exterior Areas			
	Yes	No	N/A
1) Paths and parking lot well illuminated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) Steps, ramps, grounds, parking lot in good repair, free of holes or obstruction, well illuminated?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3) Snow and ice promptly removed from parking lot and all walkway surfaces, when necessary?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4) Car stops (bumper strips) painted contrasting colors so they are clearly visible?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Food Employee Certification

Description

[Bureau of Food Safety and Laboratory Services]

The Pa Department of Agriculture Food Employee Certification Act, 3 Pa C.S. §§ 6501 - 6510, was amended and signed into Law on November 24, 2010 and took effect January 22, 2011.

- ▶ The Act Food Employee Certification Act, 3 Pa C.S. §§ 6501 - 6510, as amended, requires one *supervisory* employee per food facility to become certified in food safety and sanitation by taking a nationally recognized Food Manager Certification Exam and obtaining a National Certificate of completion. National exams are those that have been approved by the Conference of Food Protection. There are many facilitators who offer supportive classes to prepare to take these exams. **A list of trainers and training classes who are known to give these National courses and exams can be found under the PUBLICATIONS section below.** The certification training may be obtained through classroom, computer-based, combination home study/classroom, or home study.
- ▶ Nationally recognized courses and exams include: Prometrics, National Restaurant Association (ServSafe), National Registry and 360Training.com, Inc. and can be found at: <https://www.ansica.org/wwwversion2/outside/ALLdirectoryListing.asp?menuID=8&prgID=8&status=4> Be cautious you are taking a Manager Certification course and NOT a Food Handlers Course. A Manager Certification course will end with you taking a proctored exam.
- ▶ The Act does not require the certified person to be on premises during all hours of business, but does require that they be *available* during all hours of operation. When in the facility, the certified supervisory employee is the Person-in-Charge (PIC).
- ▶ New establishments will have 90 days to comply with the Act; existing establishments which are not in compliance due to employee turnover or other loss of certified person shall have three (3) months from the date of loss to comply.

HOW WILL THE RECENT AMMENDMENTS TO THE FEC ACT EFFECT ME?

- ▶ 1. Your current PDA Certificate will be recognized up to its expiration date. Once your PDA Certificate expires, you must have a valid, updated, National Exam Certificate posted in your facility.
- ▶ 2. Anyone who has recently taken a Nationally Recognized course/exam and has a valid National Certificate need not apply to the Department. The Department is no longer issuing PA FEC Certificates. **Simply post your valid National Certificate in the food facility.**
- ▶ 3. Anyone who has not taken a Nationally Recognized Exam and who does not have a valid PDA Certificate must make arrangements to take one of the nationally recognized exams and post that National Certificate in the facility.

The types of food service establishments that need to comply with the Act include:

This Application for a Certificate of Appropriateness has been modified slightly to fit the format of these *Design Guidelines*.
Original copies of the Application may be obtained from the Borough Office

**BOROUGH OF AMBRIDGE, PENNSYLVANIA
APPLICATION FOR CERTIFICATE OF APPROPRIATENESS**

If the affected property is located within the boundaries of the Ambridge Historic District, as defined by Ordinance No. 900, then this Application must be submitted to the Building Inspector as a supplement to the Building Permit Application. **IMPORTANT:** All applicants must complete Sections I, II, and III

I. IDENTIFICATION OF APPLICANT

	Name	Complete Mailing Address	Telephone
1. Applicant			
2. Property Owner			
3. Contractor			

I hereby certify that I am the owner of record or 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/her authorized agent.

Signature of Applicant

Address

Date of Application

II. LOCATION OF PROPERTY

Street Address _____

III. DESCRIPTION OF WORK

Describe the full extent of the exterior changes to be made to the property or the exterior characteristics of the structure (building, fence, etc.) to be erected. Attach plans or sketches in sufficient detail to enable the Historical Architectural Review Board to determine if the proposed work is appropriate to the stated purpose of the Ambridge Historic District Ordinance. Please attach photographs and other supplementary materials (catalog cuts, etc.) that will enable the Board to understand fully the extent of the project.

TO BE COMPLETED BY HISTORICAL ARCHITECTURAL REVIEW BOARD

Comments, including recommendations on plans, specification, materials, and scope of work, if any, which in the opinion of the Board would protect the distinctive historic character of the Ambridge Historic District .

**APPLICANTS-DO NOT WRITE ON THIS SIDE OF THE APPLICATION
BOROUGH OF AMBRIDGE, PENNSYLVANIA BOARD OF ARCHITECTURAL REVIEW**

IV. REVIEW

V. REPORT

In determining the recommendations to be made to Borough Council concerning the issuance of a Certificate of Appropriateness authorizing a permit for the construction, within the Ambridge Board shall consider the following measures: alteration, reconstruction, restoration, demolition, or razing of all, or part of any building

The written report to Borough Council concerning the Board's recommendation on the issuance of a Certificate of Appropriateness shall set out the following matters: Historic District, the

1. The effect of the proposed change upon the general historic and architectural nature of the District
2. The appropriateness of the exterior architectural features which can be seen from a public street or way;
3. The general design, arrangements, texture, material, and color of the building or structure and the relation of such factors to similar features of buildings or structures within the district
4. The height of any new building or structure shall not exceed the height of the tallest adjacent building or structure by more than ten (10) percent. This requirement shall also apply to any proposed modifications to existing buildings or structures .
5. In cases where applications for proposed demolition occur, the Board shall, where deemed necessary, recommend to the Borough Council that the proposed demolition be postponed for a period not to exceed nine (9) months. However, in the event that demolition cannot be avoided, then the moving of a building shall be encouraged as an alternative to demolition if there is no other way to preserve the building.

1. The exact location of the area in which the work is to be done
2. The exterior changes to be made or the exterior character of the structure to be erected
3. A list of the surrounding structures with their general exterior characteristics
4. The effect of the proposed change upon the general historic and architectural nature of the district
5. The appropriateness of exterior architectural features of the building which can be seen from a public way or street
6. The general design, arrangement, texture, material, and color of the building or structure and the relation of such factors to similar features or buildings within the District
7. The opinion of the Board (including and dissent) as to the appropriateness of the work proposed as it will preserve or destroy the historic aspect and nature of the District, and
8. The specific recommendations of the Board as to the issuance by Borough Council or its refusal to issue a Certificate of Appropriateness

VI. ACTION OF THE REVIEW BOARD

- Approval
- Disapproval

Date: _____

Vote: _____ to _____

Signed: _____
Secretary

VII. ACTION OF BOROUGH COUNCIL

I hereby certify that a Certificate of Appropriateness was _____ approved / denied _____ by the Borough Council of the Borough of Ambridge on the _____ day of _____.

_____ Date _____ Secretary _____

VII. RECORD OF EVENTS

REVIEW BOARD

Date

A. Received by Review Board

BOROUGH COUNCIL

Date

B. Returned to Owner.

A. Received Recommendation from Board of Architectural Review

- to be modified
- for additional information

C. Disapproval:

- Indication to Applicant of Action and Recommendation
- Recommend Disapproval to Borough Council

D. Approval:

- Recommend Approval to Borough Council

B. Disapproval:

- Letter to Applicant _____
- Copy to Pennsylvania Historical & Museum Commission _____

C. Approval

- Certificate of Appropriateness _____

BUILDING PERMIT OFFICER

- A. Building Permit Issued** _____
- B. Project Completed** _____