

FACT SHEET SWIMMING POOLS

(ZONING ORDINANCE 184-71.B.(2) & 71.C.(1); 2021 IRC; & 2021 INTERNATIONAL SWIMMING POOL AND SPA CODE)

DESIGN REQUIREMENTS

- A. All pools capable of containing 24" or more of water, filters, pumps, and other mechanical equipment require a permit, and:
1. SHALL BE located at least 10' from the rear and side yard.
 2. ARE NOT permitted in the front yard.
- B. A 4' high barrier (fence/wall) shall surround the pool.
1. Above-ground pools greater than 4' do not require additional barrier protection. However, the ladder serving the pool shall be locked in the upright position or removed and locked up elsewhere when the pool is not in use.
 2. All gates or doors which directly access the pool area and are part of the barrier shall be self-closing, self-latching, and lockable.
 3. In cases where a wall of the dwelling that also serves as part of the required barrier and where doors or windows provide direct access to the pool through that wall, one of the following shall be required:
 - a. Doors and operable windows having a sill height of less than 4' above the indoor finished floor shall have an audible alarm when the door, window, or their screens are opened.
 - b. A pool safety cover that complies with **ASTM International** standard **F1346** shall be installed.
 - c. An approved means of protection, such as self-closing doors with self-latching devices, is provided.

Note: All items must comply with the [2021 INTERNATIONAL RESIDENTIAL CODE](#) and the [2021 INTERNATIONAL SWIMMING POOL AND SPA CODE](#).

- C. Backwash discharge shall be directed to the street and shall not be directed onto an adjacent neighboring property.
- D. Receptacles that provide power to filters, pumps, and other mechanical equipment shall be located at least 6' to 10' away from the pool and operated via an exterior GFCI outlet.

PERMIT INFORMATION

Seasonal pop-up swimming pools capable of containing 24" or more of water require a [UCC Residential Construction Permit](#) to be obtained every year. The fee is **\$20.00**. Please note that extra fees will be charged for electrical reviews and permits.

Above-ground swimming pools capable of containing 24" or more of water require a [UCC Residential Construction Permit](#) and an [Electrical Permit](#).

In-ground swimming pools require a [Swimming Pools Permit Package](#), which includes a Drainage Permit, a UCC Residential Construction Permit, and an Electrical Permit.

ALL POOL PERMIT APPLICATIONS REQUIRE A PLOT PLAN WHICH SHOWS THE FOLLOWING:

- Setback dimensions - 10' side yard & rear yard; the pool may not be located in the front yard
- Location of existing structures
- Fence location – pools and fences cannot be placed in any easements of record
- Discharge location for backwash discharge

ALL POOL PERMIT APPLICATIONS ARE REQUIRED TO INCLUDE MANUFACTURER'S INSTALLATION INSTRUCTIONS.

Permit applications are available at the Limerick Township building or on the [Permits & Forms](#) page of the Limerick Township website.

PLEASE NOTE: INSPECTIONS ARE REQUIRED FOR ALL SWIMMING POOLS.



Greta Martin Washington
Director of Community Planning
Planning@LimerickPA.org
Administration 610.495.6432
Police 610.495.7909
FAX 610.495.0353

646 West Ridge Pike, Limerick, PA 19468

www.LimerickPA.org

DRAINAGE PERMIT APPLICATION

(LIMERICK TOWNSHIP CHAPTER 151)

PAPER: 1 COPY OF APPLICATION AND 2 COPIES OF THE PLANS REQUIRED, PLUS
ELECTRONIC: FULL ELECTRONIC SET (APPLICATION, PLAN, ETC.) EMAILED TO CODES@LIMERICKPA.ORG.

ALL PLANS SHALL BE DATED WITH ALL REVISIONS AND MUST BEAR THE NAMES OF: (1) THE PERSON WHO PREPARED THE PLAN; (2) THE APPLICANT; AND (3) THE OWNER OF THE LAND. PERMIT FEES MUST BE SUBMITTED WITH THE PERMIT APPLICATION. IF ESCROW IS REQUIRED FOR THE PROJECT, SUBMIT TWO SEPARATE CHECKS; ONE FOR THE FEE AND ONE FOR THE ESCROW. ALL CHECKS SHOULD BE MADE PAYABLE TO "LIMERICK TOWNSHIP."

1. APPLICANT PROPOSES THE FOLLOWING ACTIVITIES:

- ☐ NEW PRINCIPAL STRUCTURE ☐ IN-GROUND POOL ☐ RESIDENTIAL ADDITION, SHED, PATIO
☐ EARTH DISTURBANCE (GENERAL) ☐ STORM DRAINAGE OR OTHER MISCELLANEOUS REPAIR
☐ IMPERVIOUS SURFACE _____ SF ☐ EARTH DISTURBANCE _____ SF ☐ VEGETATION DISTURBANCE (> OF 25,000 SF) _____ SF

SCOPE OF WORK _____

PROPERTY ADDRESS _____

SUBDIVISION _____ TAX MAP PARCEL No. _____

ESTIMATED START DATE _____ ESTIMATED COMPLETION DATE _____

2. IDENTIFICATION INFORMATION

APPLICANT NAME _____ PHONE _____

ADDRESS (STREET, CITY, STATE, ZIP) _____

EMAIL _____

OWNER NAME (IF DIFFERENT FROM APPLICANT) _____ PHONE _____

ADDRESS (STREET, CITY, STATE, ZIP) _____

EMAIL _____

CONTRACTOR NAME _____ PHONE _____

ADDRESS (STREET, CITY, STATE, ZIP) _____

EMAIL _____

DESIGN PROFESSIONAL NAME _____ PHONE _____

ADDRESS (STREET, CITY, STATE, ZIP) _____

EMAIL _____

NAME OF INDIVIDUAL INSPECTING BMP INSTALLATION _____ PA LICENSE NO.: _____

DRAINAGE PERMIT APPLICATION

PROPERTY ADDRESS _____

3. PLANS AND DOCUMENTATION REQUIRED – GENERAL (SEE CHECKLIST ATTACHED FOR SPECIFIC REQUIREMENTS)

- A. DRAINAGE PLAN:** THE PLAN SHALL SHOW ALL OF THE FOLLOWING INFORMATION WITH THE APPLICATION: PRESENT CONTOURS; PROPOSED CONTOURS; ALL LOT LINES; MINIMUM BUILDING SETBACK LINES; STREETS; DRIVEWAYS; BUILDING(S) WITH FINISHED FLOOR AND GARAGE FLOOR ELEVATIONS (BASEMENT FLOOR IF A WALK-OUT BASEMENT); TREES OVER 6" IN DIAMETER; DESCRIPTION OF SOIL TYPE, DOCUMENTED WETLANDS, AND CLASSIFICATION DETAILS WITH LOCATION OF PROPOSED DRAINAGE FACILITIES.

ALL STORMWATER CALCULATIONS, AS REQUIRED BY THE TOWNSHIP ENGINEER, SHALL COMPLY WITH CHAPTER 151 OF THE LIMERICK TOWNSHIP CODE, ENTITLED, LIMERICK TOWNSHIP STORMWATER MANAGEMENT ORDINANCE.

PLAN TITLE _____

DATE _____ LAST REVISION _____

REGISTERED DESIGN PROFESSIONAL _____

- B. EROSION AND SEDIMENTATION PLAN:** IF AN EROSION AND SEDIMENTATION CONTROL PLAN HAS NOT PREVIOUSLY BEEN APPROVED, IT MUST ACCOMPANY THIS APPLICATION, IF APPLICANT IS PROPOSING ACTIVITIES INVOLVING EARTH DISTURBANCE. LOCATION OF ACCESS FROM THE ROAD MUST BE SHOWN ON THE PLANS.

EROSION AND SEDIMENTATION CONTROL PLAN HAS BEEN PREVIOUSLY APPROVED (LETTER ATTACHED) ☐ YES ☐ NO

EROSION AND SEDIMENTATION CONTROL PLAN ATTACHED. ☐ YES ☐ NO

TITLE _____

DATE _____ DATE APPROVED _____

- C. ADDITIONAL DOCUMENTATION TO BE SUBMITTED WITH APPLICATION:** (OR PRIOR TO ISSUANCE IF NOT AVAILABLE AT TIME OF APPLICATION)

SUBMITTED N/A

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | PROPOSED SCHEDULE OF CONSTRUCTION |
| <input type="checkbox"/> | <input type="checkbox"/> | PROPOSED SCHEDULE OF BMP INSPECTIONS TO BE PERFORMED BY APPLICANT'S ENGINEER |
| <input type="checkbox"/> | <input type="checkbox"/> | NPDES PERMIT ATTACHED (IF EARTH DISTURBANCE IS GREATER THAN ONE ACRE OF LAND) |
| <input type="checkbox"/> | <input type="checkbox"/> | DEP GENERAL PERMITS |
| <input type="checkbox"/> | <input type="checkbox"/> | DEP JOINT PERMIT APPLICATION (IF WETLANDS ARE DISTURBED) |
| <input type="checkbox"/> | <input type="checkbox"/> | STORMWATER REPORT – IF SO, BMP O&M AGREEMENT IS REQUIRED |
| | <input type="checkbox"/> | BMP O&M AGREEMENT |
| <input type="checkbox"/> | <input type="checkbox"/> | AQUA SEWER LETTER OF ADEQUACY / APPROVAL LETTER |
| <input type="checkbox"/> | <input type="checkbox"/> | INDIVIDUAL WELL MCHD PERMIT / ONLOT SEPTIC SYSTEM MCHD PERMIT |

IF ACCESS TO PROPERTY IS NOT TAKEN FROM EXISTING DRIVEWAY, A ROAD OPENING PERMIT IS REQUIRED.

ACCESS WILL BE TAKEN FROM ROAD NAME _____ ☐ LOCAL ☐ SWAMP ☐ PENNDOT

SUBMITTED N/A

- | | | |
|--------------------------|--------------------------|-----------------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | ROADWAY PERMIT |
| | <input type="checkbox"/> | TOWNSHIP ROAD OCCUPANCY PERMIT |
| | <input type="checkbox"/> | MONTGOMERY COUNTY ROADS & BRIDGES |
| | <input type="checkbox"/> | PENNDOT HIGHWAY OCCUPANCY PERMIT |
| | <input type="checkbox"/> | PENNDOT DECLARATION OF ADEQUACY |

DRAINAGE PERMIT APPLICATION

PROPERTY ADDRESS _____

4. PERMIT FEES PER RESOLUTION

NOTE: APPLICATION FEE IS NON-REFUNDABLE. ESCROW MAY BE WAIVED IF CONSTRUCTION ESCROW IS POSTED. SEPARATE CHECK REQUIRED FOR ESCROW AND APPLICATION FEE.

*ESCROW LISTED IS AMOUNT REQUIRED UNLESS OTHERWISE DETERMINED BY THE TOWNSHIP ENGINEER.

	FEES	ESCROW*
1. RESIDENTIAL ADDITION OR RESIDENTIAL ACCESSORY STRUCTURE	\$535.00	N/A
2. RESIDENTIAL INGROUND POOL	\$835.00	N/A
3. RESIDENTIAL STORM DRAINAGE	\$85.00	\$475.00
4. ALL OTHER PROJECTS		\$1,100.00
APPLICATION FEE = EARTH DISTURBANCE + STRUCTURE	\$85.00 / (DISTURBANCE OF FIRST ACRE)	
	ADD \$12.00 PER ADDITIONAL ACRE (ROUND UP)	
	\$60.00 / PER STRUCTURE	

5. CERTIFICATION & ACKNOWLEDGEMENT

I HEREBY STATE THE ABOVE FACTS AND STATEMENTS, INCLUDING ANY ATTACHMENTS ARE TO THE BEST OF MY KNOWLEDGE, ACCURATE AND COMPLETE. I FURTHER UNDERSTAND THAT ANY FALSIFICATION OF INFORMATION OR AN INCOMPLETE APPLICATION MAY BE CONSIDERED REASON TO REJECT THE APPLICATION AND THAT THE FALSE STATEMENTS HEREIN ARE MADE SUBJECT TO THE PENALTIES OF PA CONS. STAT. 4904 RELATING TO UN-SWORN FALSIFICATION TO AUTHORITIES.

NO DRAINAGE PERMIT SHALL BE ISSUED FOR THE FILLING OF MATERIALS OTHER THAN CLEAN FILL.

PLEASE BE ADVISED, DEPOSIT OF THE CHECKS REPRESENTING THE FEE(S) AND ENGINEERING ESCROW AMOUNTS FOR THIS APPLICATION DOES NOT CONSTITUTE APPROVAL OR GRANTING OF SAME BY LIMERICK TOWNSHIP. REGARDING THE ESCROW, THE APPLICANT IS RESPONSIBLE FOR THE ACTUAL COST. FUNDS SHALL BE REPLENISHED AT REQUEST OF TOWNSHIP. AT COMPLETION OF PROJECT, BALANCE OF ESCROW FUNDS WILL BE RETURNED UPON REQUEST.

SIGNATURE OF APPLICANT _____ DATE _____

☐ OWNER ☐ APPLICANT ☐ CONTRACTOR ☐ DESIGN PROFESSIONAL

TOWNSHIP USE ONLY BELOW THIS LINE

DRAINAGE PLAN APPROVAL _____ DATE _____

DESCRIPTION OF WORK / CONDITIONS OF PERMIT:

DRAINAGE PERMIT FOR [STORMWATER, GRADING, E&S, VEGETATION DISTURBANCE] TO ALLOW FOR THE CONSTRUCTION OF [NEW PRINCIPAL STRUCTURE, IN-GROUND POOL, STORMWATER DRAINAGE, RESIDENTIAL ADDITION, SHED, PATIO, OTHER: _____]

PER PLANS ISSUED WITH THE PENNONI LETTER DATED ____/____/____.

THIS PERMIT ISSUED IN CONJUNCTION WITH: PLANS DATED: ____/____/____

NPDES PERMIT NO. _____

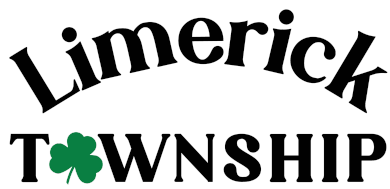
STORMWATER REPORT DATED ____/____/____ BMP O&M AGREEMENT RECORDED ____/____/____

NEW IMPERVIOUS AREA: _____ SF _____ AC

TOTAL EARTH DISTURBANCE: _____ SF _____ AC

TOTAL VEGETATION DISTURBANCE: _____ SF _____ AC

INSPECTIONS REQUIRED PER ATTACHED CHECKLIST



Administration 610.495.6432

Police 610.495.7909

FAX 610.495.0353

646 West Ridge Pike, Limerick, PA 19468

www.LimerickPA.org

RESIDENTIAL CONSTRUCTION APPLICATION: UNIFORM CONSTRUCTION CODE/ZONING

1. PROJECT INFORMATION:

<input type="checkbox"/> New Structure	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration	<input type="checkbox"/> Demolition	<input type="checkbox"/> Accessory Structure
<input type="checkbox"/> Alternative Energy	<input type="checkbox"/> Swimming Pool, Spa, or Hot Tub <input type="checkbox"/> Other:			
Description of Work:				

Attach additional information as needed

2. PROPERTY INFORMATION:

Site Address:	Street #	Street Name	City	Zip
Tax Parcel #:				
Utilities:	<input type="checkbox"/> Public Water	<input type="checkbox"/> Private Well	<input type="checkbox"/> Public Sewer	<input type="checkbox"/> Private Septic
Is Any Portion of the Property in a Flood Hazard Area?		<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Does the Property Have Any Easements, Right-Of-Ways, or Other Restrictions?				

Owner:	First and Last or Company	Phone:		Email:	
Mail Address:	Street #	Street Name	City	Zip/State	
Authorized Agent (General Contractor, Building Manager, etc.)		First and Last Name			
Phone #:		Fax #:		Email:	
Mail Address:	Street #	Street Name	City	Zip/State	

3. BUILDING GENERAL INFORMATION:

Description of Building Use:					
Building Height:		Stories Above Grade Plane:		Access to a State Highway:	
Automatic Fire Sprinkler System:		Other Fire Suppression:			
Fire Alarm System:		Security Alarm System:			
Project Associated with a Manufactured Home (mobile home, trailer, etc.)?					
Elevator:		Propane or LPG:		Existing Area (sq/ft):	Proposed Area (sq/ft):
Other Regulatory or Governing Entities?					

4. BUILDING SYSTEM INFORMATION:

Electrical:					
Service Size:		Service Voltage:		Utility Company:	
Backup Generator:		Photovoltaic (solar):		Turbine/wind:	

Mechanical:					
Fuel:	<input type="checkbox"/> Nat Gas	<input type="checkbox"/> LPG	<input type="checkbox"/> Fuel Oil	<input type="checkbox"/> Waste Oil	<input type="checkbox"/> Electric <input type="checkbox"/> Other:
Wood/Solid Fuel Appliance:			Exterior Grill or Cooking Appliance:		

Plumbing:	Fixture Type and Quantity				
Clothes Washer:		Bathtub:		Floor Drain:	
Comb. Sink & Tray:		Dental Lav:		Dental Cuspidor:	
Dishwasher:		Bidet:		Drinking Fountain:	
Floor Sink:		Laundry Tray:		Kitchen Sink:	
Service Sink:		Lavatory:		Shower:	
Other Sink:		Urinal:		Wash Sink:	
Water Closet:		Other:		TOTAL:	

5. APPLICATION SUBMISSION REQUIREMENTS *(check after reading)*

<input type="checkbox"/> This PA UCC application is considered <u>denied</u> until all other approvals have been provided for. This includes but is not limited to: Zoning; Land Development; Grading; PennDOT Highway Occupancy; PA Dept of Labor and Industry; Montgomery County Health Department, etc.
<input type="checkbox"/> Two sets of construction documents submitted for review shall be submitted on a minimum of 24"x36" (ARCH D) size. Additional copies and other documents or approvals may be requested at the determination of the Building Code Official or designee.

6. CONSTRUCTION VALUATION

General Site/Building:		Electrical:		Mechanical:	
Plumbing:		Fire:		Other:	
				Total:	

7. CERTIFICATION

The applicant hereby certifies that all information on this application is correct and the work will be completed in accordance with the "approved" construction documents and PA Act 45 of 1999 (Pennsylvania Uniform Construction Code) and all other applicable laws of this jurisdiction. The applicant also certifies that the content of the certificate of Workers Compensation Insurance or Affidavit on file with Limerick Township is still in effect with no changes in coverage.

I hereby state the above facts and statements, including any attachments, are to the best of my knowledge, accurate and complete. I further understand that any falsification of information or an incomplete application may be considered reason to deny or reject the application and that the false statements herein are made subject to the penalties of PA Cons. Stat. 4904 relating to un-sworn falsification to authorities.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such application and permit(s).

Signature of Owner	Date
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Signature of Agent	Date
--------------------	------

Point of Contact:	First and Last Name	Email:	
Phone #:		Cell #:	Fax #:

TOWNSHIP USE ONLY BELOW THIS LINE

Zoning:	EDU:	UCC:	Fire:	Permit #
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Administration 610.495.6432

Police 610.495.7909

FAX 610.495.0353

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ZONING INFORMATION

PLEASE ANSWER THE FOLLOWING ADDITIONAL QUESTIONS.

1. SITE ADDRESS _____ ZONING DISTRICT _____
2. SUBDIVISION NAME _____ IS YOUR PROPERTY PART OF AN HOA? YES NO
3. BUILDING USE: PERSONAL/HOBBY/RESIDENTIAL BUSINESS OR HOME OCCUPATION
4. WILL THERE BE NEW IMPERVIOUS SURFACE? ☐ YES ☐ NO SF _____
5. WILL THERE BE EARTH DISTURBANCE? (EXCAVATIONS & GRADING) ☐ YES ☐ NO SF _____
6. WILL THERE BE VEGETATION DISTURBANCE > 25,000 SF ☐ YES ☐ NO SF _____
7. WILL THERE BE A RELOCATION OF THE WELL OR SEPTIC SYSTEM? ☐ YES ☐ NO
8. WILL THERE BE ADDITIONAL BEDROOMS? ☐ YES ☐ NO
9. PROVIDE THE TOTAL AMOUNT (EXISTING & PROPOSED) BUILDING COVERAGE ON PROPERTY. THIS INCLUDES ANY AREA COVERED WITH ROOFS SUCH AS BALCONIES, PORCHES, ETC. FOR RESIDENTIAL PROJECTS, DO NOT INCLUDE DECKS OR PATIOS. FOR NON-RESIDENTIAL PROJECTS DECKS AND PATIOS SHALL BE INCLUDED.
TOTAL BUILDING COVERAGE: EXISTING: _____ SF PROPOSED: _____ SF
LOT SIZE: _____ ACRES
CALCULATE THE PERCENT BUILDING COVERAGE:
(TOTAL BUILDING COVERAGE DIVIDED BY LOT SIZE) _____ ACRES
10. PLOT PLAN REQUIREMENTS CHECKLIST – A PLOT PLAN MUST BE SUBMITTED WITH THE APPLICATION. ALL OF THE FOLLOWING MUST BE CLEARLY ILLUSTRATED AND IDENTIFIED ON THE ATTACHED PLOT PLAN OR NOTED AS NOT PRESENT ON THE PARCEL:
 - ☐ 1. PROPERTY LINES INCLUDE BEARING AND DISTANCE INFORMATION, IF READILY AVAILABLE.
 - ☐ 2. ALL EASEMENTS AND/OR REQUIRED BUFFER YARDS.
 - ☐ 3. OUTLINE OF ALL STRUCTURES (HOUSE, SHEDS, PORCHES, POOLS, ETC.)
 - ☐ 4. DISTANCE OF THE PROPOSED STRUCTURE TO THE SIDE AND REAR PROPERTY LINE AND CENTERLINE OF STREET/ROAD.
 - ☐ 5. DRIVEWAY LOCATION & WIDTH.
 - ☐ 6. EXISTING AND PROPOSED UTILITY LOCATIONS.

NOTES

1. STRUCTURES CANNOT BE PLACED IN EASEMENTS OR RIGHT-OF-WAYS.
2. WHEN ADDING ADDITIONAL BEDROOMS TO A DWELLING WITH ON-LOT SEPTIC SYSTEMS, APPROVAL FROM MONTGOMERY COUNTY HEALTH DEPARTMENT IS REQUIRED.



James Lucas
Director of Code Services
Codes@LimerickPA.org
610.495.6432

646 West Ridge Pike, Limerick, PA 19468

www.LimerickPA.org

PERMIT # _____
TO BE COMPLETED BY TOWNSHIP

RESIDENTIAL CONSTRUCTION PERMIT APPLICATION: ELECTRICAL

2021 IRC CODE

1. GENERAL PROJECT INFORMATION

Location of Project:		Cost:	
Type of Project Work:	<input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Other _____		
Description of Work:	 		

2. ELECTRICAL PROJECT DETAILS

FIXTURE	QUANTITY	FIXTURE	QUANTITY	FIXTURE	QUANTITY
SWITCHES		WATER HEATERS		SOLAR - ROOF MOUNTED*	
PLUG RECEPTACLES		DRYERS		SOLAR - GROUND MOUNTED	
LIGHTING CIRCUITS		RANGES		PANEL SIZE	
BASE BOARDS		SPAS		SUB-FEEDER SIZE	
HEATERS		POOL PUMPS		OTHER _____	

*ROOF-MOUNTED SOLAR PANELS REQUIRE AN ENGINEER'S CERTIFICATION FOR THE ROOF STRUCTURE.

ALL ELECTRICAL WORK MUST BE INSPECTED BY AN ELECTRICAL UNDERWRITER PRIOR TO A LIMERICK TOWNSHIP INSPECTION.

Inspection Agency:	
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PLEASE PROVIDE TWO (2) SETS OF CONSTRUCTION DOCUMENTS FOR REVIEW. PLEASE INCLUDE MANUFACTURER SPECIFICATIONS, DIAGRAMS, ENGINEERED CALCULATIONS, LOCATION, NATURE, AND EXTENT OF WORK.

3. CERTIFICATION

The applicant hereby certifies that all information on this application is correct, and the work will be completed in accordance with the "approved" construction documents and PA Act 45 of 1999 (Pennsylvania Uniform Construction Code) and all other applicable laws of this jurisdiction. The applicant also certifies that the content of the certificate of Workers Compensation Insurance or Affidavit on file with Limerick Township is still in effect with no changes in coverage.

I hereby state the above facts and statements, including any attachments, are to the best of my knowledge, accurate and complete. I further understand that any falsification of information or an incomplete application may be considered reason to deny or reject the application and that the false statements herein are made subject to the penalties of PA Cons. Stat. 4904 relating to un-sworn falsification to authorities.

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such application and permit(s).

Signature of Owner or Authorized Agent/Contractor

Date

THIRD PARTY ELECTRICAL INSPECTION AGENCIES 2025

You must submit the Electrical Application with your plans to one of the agencies listed below for their review and approval. Once you receive approval, please submit the approval and plans along with the rest of the UCC Application to the Limerick Township Code Department. Limerick Township cannot answer any questions on behalf of the agencies listed below. Please contact them directly if you have questions regarding billing for their services.

- 1) **Middle Department Inspection Agency, Inc.**
404 West Ridge Pike
Conshohocken, PA 19428
PHONE: 800-992-6342
FAX: 215-244-1927
EMAIL: edpaugh@mdia.us
- 2) **Faulkner Inspection Services, LLC**
1201 Cherry Wood Court
Phoenixville, PA 19460
PHONE: 610-350-9957
FAX: 610-933-5509
EMAIL: mtfaulkner@msn.com
- 3) **Bureau Veritas North America**
790 Park Way Drive
Broomall, PA 19008
PHONE: 610-543-3925
FAX: 610-543-1933
EMAIL: carol.barker@bureauveritas.com
- 4) **United Inspection Agency**
716 N. Bethlehem Pike, Suite 300
Lower Gwynedd, PA 19002-2656
PHONE: 215-542-9977
FAX: 215-540-9721
EMAIL: info@unitedinspectionagency.com
- 5) **Middle Atlantic Electrical Inspections**
302 East Pennsylvania Boulevard
Feasterville, PA 19053
PHONE: 215-322-2626
FAX: 215-364-7921
EMAIL: brisi@biuinc.com
- 6) **American Inspection Agency, Inc.**
342 Miller Road
Sinking Spring, PA 19608
PHONE: 610-678-4336
FAX: 610-678-4359
EMAIL: aia.inc@juno.com
- 7) **Code Inspections, Inc.**
603 Horsham Road
Horsham, PA 19044
PHONE: 215-672-9400
FAX: 215-672-9736
EMAIL: contact@codeinspections.net
- 8) **Commonwealth Code Inspection Services**
176 Doe Run Road
Manheim, PA 17545
PHONE: 717-664-2347
FAX: 717-664-4953
EMAIL: talksoon@commonwealthcode.com
- 9) **Underwriter Inspection Services, Inc.**
153 N. Reed Road
Limerick, PA 19468
PHONE: 610-495-2803
EMAIL: codecopuis@gmail.com
EMAIL: codecop@comcast.net
- 10) **Bower Code Services & Inspections, LLC**
1104 Rapps Dam Road, Apt. 24
Phoenixville, PA 19460
PHONE: 484-345-8986
EMAIL: bowercodeservices@gmail.com