



# Deck Permit Application

Scott Township  
301 Lindsay Road  
Carnegie, PA. 15106  
412-276-5300 Ext 216

---

*For Internal use only – to be completed by Code Enforcement Office*

Zoning District: \_\_\_\_\_ Lot & Block: \_\_\_\_\_ Zoning Hearing: **Y / N**

---

All sections of this application must be completed in their entirety, or the application will be rejected. Please note that applications will be processed in the order that they are received.

## **PROPERTY OWNER**

Property Address \_\_\_\_\_

Property Owner \_\_\_\_\_

Owner Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

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

## **CONTRACTOR**

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

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

PA Certification No. \_\_\_\_\_

## **DESIGN PROFESSIONAL**

Company Name \_\_\_\_\_

Contact Name \_\_\_\_\_

Address \_\_\_\_\_

City, State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell Phone No. \_\_\_\_\_

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

Design Professional License No. \_\_\_\_\_



# Deck Permit Application

Scott Township  
301 Lindsay Road  
Carnegie, PA. 15106  
412-276-5300 Ext 216

**All plans must comply with the respective 2018 International Building Code (IBC) or 2018 International Residential Code (IRC) as amended by the Pennsylvania Uniform Construction Code (UCC)**

**IMPORTANT: All submittals must include the application fee, one (1) copy of the completed Payment Verification Form, two (2) copies of the completed application and two (2) copies of all plans & specifications. Two (2) copies of a Site Plan/Land Survey are required with all applications.**

Please provide the following information, as applicable, for the work for which a construction permit is sought.

Site Plan / Survey: \_\_\_\_\_

Deck Drawings: \_\_\_\_\_

Deck Details: \_\_\_\_\_

Additional documents/information may be required as deemed necessary by the Building Code Official (BCO)

Height of Deck (measured at lowest point within three (3) feet of the proposed deck location): \_\_\_\_\_ feet and \_\_\_\_\_ inches

Width: \_\_\_\_\_ feet and \_\_\_\_\_ inches

Depth: \_\_\_\_\_ feet and \_\_\_\_\_ inches

Describe Project:

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

Estimated Cost of Total Project \$ \_\_\_\_\_ (material & labor)

I hereby agree to be bound by the provisions of the ordinances, specifications, regulations, and restrictions as may be imposed by Scott Township regarding this application. I verify that the statements made in this application are true and correct. I understand that any false statements herein are made subject to the criminal penalties of 18 Pa. C.S. as 4904.

\_\_\_\_\_  
Property Owner's Signature

\_\_\_\_\_  
Date of Application

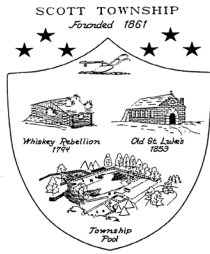
\_\_\_\_\_  
Print Property Owner's Name

*For internal use only – to be completed by Code Enforcement Office*

Fee \$ \_\_\_\_\_

\_\_\_\_\_  
Code Enforcement Officer's Signature

\_\_\_\_\_  
Date Approval



# Scott Township Verification of Payments

---

**Note: This section is to be completed by the Property Owner and included with the permit application package. No permits will be approved if past due payments are owed.**

**Date:** \_\_\_\_\_ **Lot/Block:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

**Owner's Street Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Owner's Phone Number:** \_\_\_\_\_

---

**Note: This section is to be verified and completed by the Tax Office:**

Real Estate Taxes Paid:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

Sewer Bill Paid:                                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

Other Municipal Fees, Taxes  
and/or Liens:                                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

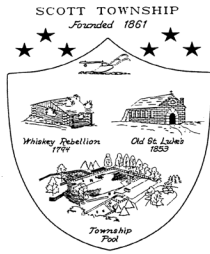
Earned Income Taxes Paid:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

**Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note: The Tax Office is to also validate the above information with the Delinquent Tax Collector and the Act 511 Tax Collector**

Other Fees, Charges,  
Judgements and/or Liens:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

**Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_



# Scott Township Verification of Payments

---

**Note: This section is to be completed by the Property Owner and included with the permit application package. No permits will be approved if past due payments are owed.**

**Date:** \_\_\_\_\_ **Lot/Block:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

**Owner's Street Address:** \_\_\_\_\_

**City/State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Owner's Phone Number:** \_\_\_\_\_

---

**Note: This section is to be verified and completed by the Tax Office:**

Real Estate Taxes Paid:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

Sewer Bill Paid:                                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

Other Municipal Fees, Taxes  
and/or Liens:                                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

Earned Income Taxes Paid:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

**Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note: The Tax Office is to also validate the above information with the Delinquent Tax Collector and the Act 511 Tax Collector**

Other Fees, Charges,  
Judgements and/or Liens:                      **Yes:** \_\_\_\_\_                      **No:** \_\_\_\_\_

**Verified By:** \_\_\_\_\_ **Date:** \_\_\_\_\_