



Lower Providence Township
 100 Parklane Drive • Eagleville, PA. 19403
 Phone: (610) 539-8020 • Fax: (610) 539-6347
 www.lowerprovidence.org

ENERGY PERMIT APPLICATION

PERMIT NO.:
DATE:

Owner: _____
Address: _____

Contractors Registration No.: _____
Contractors/Applicant Name: _____
Contractors Address: _____

Owner Phone No.: _____
Owner Cell No.: _____

Contractors Phone No.: _____
Contractors Cell No.: _____

Location of Work: _____
Type of Building: Residential Commercial Industrial
Used As: _____

Type of Work: (check one) New Addition Alteration Repair Other

Total Square Fottage: _____

Type of Fuel: Oil Gas LPG Electric Other

Total Cost of Work:	_____
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Type of Equipment:	Quantity:	Type of Equipment:	Quantity:
Air Condition Unit – SEER		Ventilation Fan	
Split System A/C		Radiant Heater	
Air Handling C.F.M.		Boilers – H.P. Ea.	
Forced Air System – B.T.U. M Ea.		A/C Compressor	
Gravity System – B.T.U. M Ea.		Heat Pump	
Electric Furnace		Pool Heater	
		Energy Permit Fees	
		PA UCC Surcharge Fee	\$4.00
		Total Fees	

Please call Lower Providence Township at (610)-539-2642 to schedule an inspection. Forty-eight (48) Hours Notice is required. By signing this application the contractor/Applicant certifies that all information given is correct and the property owner has authorized work. All work is to comply with 2006 ICC Codes. All work must be started within 6 months and completed within 1 year. Application is hereby made for a permit to install or alter any mechanical service and or systems and or heating systems on the premises described above. The information, which above, together with the mechanical plan and or heating plan, is made part of this application. By the undersigned, it is understood and agreed by this application that any error, misstatement or misrepresentation of material fact as contained in this application without approval of Lower Providence Township shall constitute sufficient ground for revocation of this permit and or prosecution or both.

 Contractor

 Date



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ENERGY CODE COMPLIANCE STATEMENT

PERMIT NO.:
DATE:

Address of Property: _____
Contractor: _____ **Signature:** _____

- Detached one or two family dwelling Townhouse Commercial
- Heat Loss Calculations (Include with Energy Efficiency Worksheet)

COMPLIANCE PATH (Check One)

1. The International Energy Conservation Code
- A. REScheck or COMcheck or other approved software – Submit REScheck or COMcheck calculations for this path
- B. (IECC) – Table _____
2. International Residential Code, Ch. 11 – Climate Zone 4
3. Pennsylvania Alternate Residential Energy Provisions – Zone S

<u>IRC Chapter 11 Requirements</u> <u>Table N1102.1</u>	
Insulation and Fenestration Requirements by Component	
Fenestration U-Factor	.35
Skylight U-Factor	0.60
Glazed Fenestration SHGC	NR
Ceiling R-Value	38
Wood Frame Wall R-Value	13
Mass Wall R-Value	5/10
Floor R-Value	19
Basement Wall R-Value	10/13
Slab R-Value & Depth	10, 2 ft
Crawl Space Wall R-Value	1013

<u>PA Alternate Provision Requirements</u> <u>Table PA401.1</u>	
Insulation and Fenestration Requirements by Component	
Fenestration U-Factor	.35
Skylight U-Factor	0.60
Ceiling R-Value	38
Wood Frame Wall R-Value	13
Mass Wall R-Value	5/10
Floor R-Value	19
Basement Wall R-Value	10/13
Slab R-Value & Depth	10, 2 ft
Crawl Space Wall R-Value	10/13

Provide the following information for the proposed dwelling:

- Air Conditioning Efficiency (SEER): _____ Submit Specs.
- Water Heating Equipment Performance (Input & Efficiency): _____
- Recessed Light Fixture Type:
 _____ Air Tight IC Fixture _____ IC or non IC Fixture in Sealed Box _____ ASTM E283 IC Fixture