ACT 157 OF 2006 - CODE OFFICIAL AND CONTRACTOR TRAINING ACCOUNT

Act 157 of 2006 amended Act 45 of 1999, the Uniform Construction Code Act (UCC), to require that municipalities administering and enforcing the UCC and third-party agencies providing services under the UCC shall assess a fee of $4 on each construction or building permit issued under the authority of this Act. The fee shall be in addition to any other fee imposed for the permit. The Act further provides that all funds collected shall be transmitted quarterly to the Commonwealth to be used for education and training purposes associated with the UCC.

Name of Municipality

County

Reporting Period (Please Check)
Year: ____________________  ☐ January - March  ☐ April - June  ☐ July - September  ☐ October - December

SECTION B - GENERAL

1. Number of construction/building permits issued for **new single family residential housing units** (single-family detached and townhouse units not exceeding 3-stories in height):

2. Number of permits issued for **all other residential** projects; including additions, accessory structures, demolitions, electrical, mechanical, plumbing, etc:

3. Number of permits issued for **new commercial** (non-residential) projects:

4. Number of permits issued for **all other commercial** (non-residential) projects; including additions, alterations, accessory structures, demolitions, change of use, electrical, mechanical, plumbing, etc:

   TOTAL number permits issued:

   TOTAL number of permits X $4.00 = $

SECTION C - BUILDING CODE OFFICIAL

Individual appointed by municipality to serve as the primary BCO (please print):

Name: _____________________________________________ L&I Certification Number: _______________________

Address: _______________________________________________________________________________________

City: __________________________ State: ___________ Zip Code: ______________________________

E-mail (if applicable): ____________________________ Phone: ________________________________

SECTION D - CERTIFICATION

I hereby certify that I have reviewed the information contained in this report and that the information provided is, to the best of my knowledge, true and correct.

_________________________  ____________________________
Signature  Date

Title  Date

Please make check payable to “DCED” and remit form and check(s) to:

Pennsylvania Department of Community & Economic Development
Governor’s Center for Local Government Services
Commonwealth Keystone Building
400 North Street, 4th Floor
Harrisburg, PA 17120-0225
1-888-223-6837