CITY OF PITTSBURGH

DEPARTMENT OF
PERMITS, LICENSES, AND INSPECTIONS

200 Ross Street, Suite 320, Pittsburgh, PA 15219
phone (412) 255-2175, fax (412) 255-2974

DECK

RESIDENTIAL
PERMIT APPLICATION

For all buildings that are ***only*** single or two family dwellings.

1. PROPERTY INFORMATION

Property Address: _____ Owner Name: _____

Use of Primary Structure: ☐ Single family dwelling

☐ Two family dwelling (A valid Certificate of Occupancy required for all two-family permit applications. A new Occupancy Permit application can be made at the Zoning Department.)

2. SCOPE OF PROPOSED WORK (Check all that apply):

Type of Deck (Choose one):

☐ Freestanding / Unattached to dwelling unit

☐ Attached and supported by dwelling unit. Note: ledger attachment is not permitted on or through brick veneer.

Width (parallel to house): _____ Depth (house to end of deck): _____

Height above grade: _____* Number of Stories: _____*

Number of Posts: _____ Post Size: _____** Post Spacing _____

Number of Beams: _____ Beam Size: _____ Beam Span _____ Beam Spacing _____

Joist Spacing: _____ Joist Size: _____ Joist Span _____

Footing Thickness: _____ Footing size: _____

Lateral Support (Choose One): ☐ Lateral Load Devices ☐ Diagonal Bracing

3. CONSTRUCTION DRAWING REQUIREMENTS

Construction drawings are required per PLI's "Standard Permit Application Requirements" bulletin on this webpage: http://pittsburghpa.gov/pli/pli-bulletins, unless the proposed work is limited to (check if applicable):

- Deck designed and constructed per American Wood Council's *"Design for Code Acceptance #6 - Prescriptive Residential Wood Deck Construction Guide" (DCA 6).* Failing to comply with this guideline may result in modification of constructed elements, including removal and reconstruction. ☐

* Applications without construction drawings limited to single story decks 8 feet or less in height measured from finish grade to finished deck surface.

** Applications without construction drawings require a minimum post size of 6 x 6.

4. CONTRACTOR INFORMATION (If Selected)

☐ Property Owner self-performing work at primary residence.

OR

☐ Licensed General contractor performing work.

Licensed Name: _____

State License No.: PA _____ City License No.: BL _____

Signature: _____ Cost of Work: $_____

Phone: _____ Email/Fax: _____

5. APPLICANT'S AFFIDAVIT:

I am the Owner of the property, or an agent of the Owner, for which this application is filed. If an agent, I certify that I have been authorized by the Owner to complete this application on their behalf. As the applicant, I certify that the information provided as part of this application is correct.

Signature: _____ Print: _____

Address: _____

Phone: _____ Email/Fax: _____

Estimated Cost of Work: $_____