Radnor Township Community Development Department Instructions and Requirements for a Generator Permit

| Provide a plot plan showing the following: | |
|---|-----|
| Location of house and any structures | |
| Location of new generator | |
| Front, side and rear yard setback measurements | |
| Setbacks and clearances for the generator | |
| Complete an Electrical permit application, load calculation sheet, single li | ine |
| diagram, standby generator - typical installation with minimum clearance sheet. | es. |
| Copy of completed Application for Natural Gas Service along with PECO | |
| response to application | |
| Manufacturer's specifications for installation of generator must be | |
| supplied. | |
| Complete a Plumbing or Mechanical permit application indicating the type | ne |
| of fuel or gas powering the generator. Gas pipe location, sizing, and | , . |
| material must be supplied. | |
| A plan review will be provided by United Inspection and the fee will be | |
| A plan review will be provided by United Inspection and the fee will be added to the Electrical Permit Application when the permit is issued. | |
| | |
| You will be notified when the permit has been reviewed and is ready for | |
| issuance. | |

If you have any questions regarding the instructions or requirements please call the Community Development Department at 610-688-5600

Please Note: An incomplete application is subject to rejection.

UNITED INSPECTION AGENCY, INC. 180 South Main Street Ambler, PA 19002

Phone: 215-542-9977 Fax: 215-540-9721



Sizing the Generator

Attached to this document United has included a Calculation Sheet for your use to calculate the electrical rating of the generator needed for your backup application. Included also is a completed Sample Calculation to use as a guideline. Note that <u>all</u> of the electrical loads to by picked up by the generator must be included in the calculation.

The Sample Calculation with the loads selected results in the need for a minimum 11 kW generator. Generators come in specific sizes. The closest size available above 11 kW is 14 kW. Refer to the Sample Single Line Diagram attached. Shown are the main service panel, generator, transfer switch and subpanel that serves the loads to be picked up. It also includes the size and type of wiring method interconnecting these devices.

The Calculation Sheet and the Single Line Diagram must be completed and presented to Township Authorities along with the Permit Application. The paperwork submitted will be reviewed for Code Compliance as part of the Review Process. All of the information shown on the Samples provided is essential to a successful Review.

Placement of the Generator

The National Fire Protection Association (NFPA) standard NFPA 37 establishes criteria for the installation of stationary combustion engines associated with backup generators. The placement requirements are based on compliance to NFPA 37 Section 4.14. Key highlights of the placement criteria are:

- The standby generator weatherproof enclosure must be at least 5 ft. from windows, doors, any wall openings, shrubs or vegetation over 12 inches in height.
- The exhaust outlet side of the weatherproof enclosure must have at least 5 ft. clearance from any structure, shrubs, trees or any kind of vegetation.
- The standby weatherproof enclosure must have 5 ft. overhead clearance from any structure, overhang or trees.
- Direct the standby generator exhaust away from or parallel to the building or structure. Position the standby generator in an area where winds will carry the exhaust gas away from potentially occupied building or structure.
- Do not place the standby generator in any area where leaves or debris normally accumulate.

This information is provided to assist you in sizing and placing the standby generator. If you wish to consult on the installation or have any questions regarding the completion of the Calculations or Single Line Diagram, please call United Inspection at 215-542-9977. We will be glad to help.

Backup Generator Load Calculation

All loads to be picked up by generator must be included in calculation

| x 60 watts each = | x 750 Watts each = | × 1100 Watts each = | × 1600 Watts each == merenamen | × 1400 Watts each ≈ xeconstruction x | x.1630 Watts each | × 5000 Watts each = x | x 600 Watts each = | x 200 Watts = | × 1030 Watts each = | x 690 Watts each = xeesements | x 4500 Watts each = myneparaments | × 1140 Watts each = mereneuspenneus | x 840 Watts each = | Sub Total Watts = | A | |) = uo | |
|-------------------|---------------------|---------------------|--------------------------------|--------------------------------------|----------------------|-----------------------|--------------------|----------------------|---------------------|-------------------------------|-----------------------------------|-------------------------------------|--------------------|-------------------|--------------------------|-----------------------|------------------------------------|----------|
| | 1/3HP | 1/2 HP | 3/4 HP | | | | | | | | | | | | | | Watts per t | 10101040 |
| Lighting Fixtures | Sump (or Well) Pump | | | Refrigerator | Microwave (built in) | Clothes Dryer | Freezer | Home Security System | Dishwasher | Disposal | Water Heater | Clothes Washer | Computer | | First 10000 Watts @ 100% | Remaining Watts @ 40% | Tons of A/C x 1750 Watts per ton = | F |

Minimum Generator Size in kW

Current Supplied by Generator

Total Watts/240 Volts =

Divide Total Watts by 1000

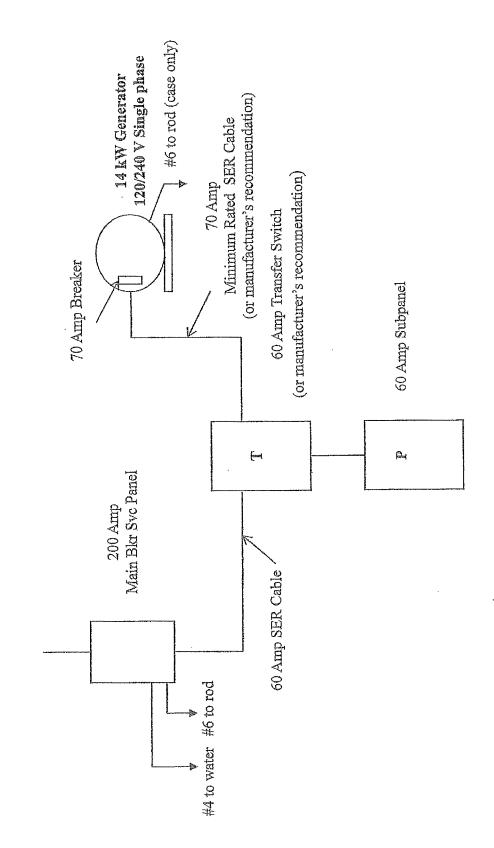
All loads to be picked up by generator must be included in calculation Quantity Backup Generator Load Calculation (Sample)

| | | pacheterovojiniseromoreniesi ja | 1100 Udania resolución de construcción de cons | becomes userpative userpative | 1400 | 1630 | | NATIONAL STATE OF STA | 200 | 1030 | THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRESS OF THE PROPERTY AND ADDRESS OF THE PROPERTY ADDRE | 4500 | THE WAS CONCURRED BY MANY THAN STUDY | 840 | 11900 | \ C | a (| O. | | 11 Minimum Generator Size |
|---------------|----------------------|---------------------------------|---|-------------------------------|-----------------------|---------------------|---------------------|--|----------------------|-----------------------|--|-----------------------|--------------------------------------|----------------------|-------------------|--------------------------|-----------------------|---|-----------------------------|----------------------------|
| Samuel Samuel | 10 x 60 watts each ≂ | x 750 Watts each = | 1 x 1100 Watts each = | ≈ 1600 watts each = | 1 x 1400 Watts each = | 1 x 1630 Watts each | x 5000 Watts each = | 1 x 600 Watts each = | 1 x 200 Watts = | 1 × 1030 Watts each = | x 690 Watts each ≍ | 1 x 4500 Watts each = | x 1140 Watts each = | 1 x 840 Watts each = | Sub Total Waffs = | 10000 A | 760 | Carriad Derived granted lawying \$2.50 min all medical graphs propagations and the second seco | 107 | |
| | Lighting Fixtures | Sump (or Well) Pump | | 3/4 HP | Refrigerator | pulit in) | Clothes Dryer | Freezer | Home Security System | Dishwasher | Disposal | Water Heater | Clothes Washer | Computer | | First 10000 Watts @ 100% | Remaining Watts @ 40% | Tons of A/C x 1750 Watts per ton = | Total Watts (Add A + B + C) | Divide Total Watts by 1000 |

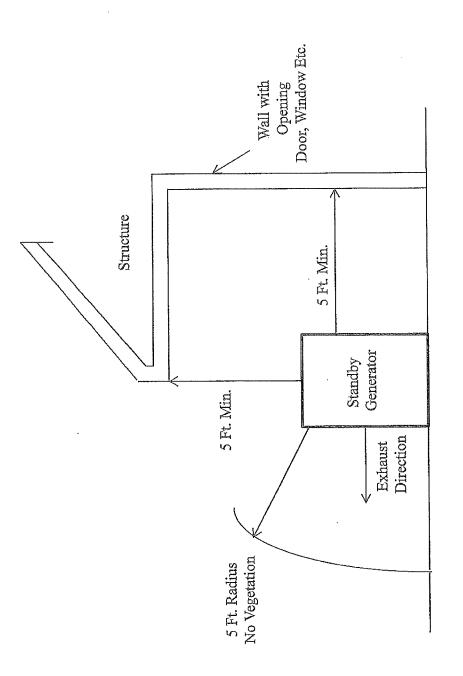
45 Current Supplied by Generator

Total Watts/240 Volts =

Single Line Diagram (Sample)



Note: All conductors Copper Type THHN/THWN unless otherwise noted



Typical Installation with Minimum Clearances



RADNOR TOWNSHIP Community Development Department Application for Mechanical Permit

| Permit No. | |
|--------------------------------|-----|
| Fee | * |
| *Include \$4.50 PA Surcharge a | and |
| \$2.00 Administrative Fee | |

| | | \$2.00 Administrative Fee | | | | | | |
|---|--|---------------------------|--|--|--|--|--|--|
| Job Location: | Address: | | | | | | | |
| Property Owner: | Name:Address/Zip:Fax: | | | | | | | |
| Mechanical Contractor: | Name:Address/Zip:Fax: | | | | | | | |
| | mmercial □ Institutional □ eration □ Other □ | Proposed Install Date: | | | | | | |
| Description of Work | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | HEATING | | | | | | | |
| Type of Fuel | Cost of Installation | Cost of Installation | | | | | | |
| Name of Unit | Mfg. By | Mfg. By | | | | | | |
| Capacity of Unit (BTU's) | InputOutput | Output | | | | | | |
| | | | | | | | | |
| | AIR CONDITIONING | | | | | | | |
| | Input Cost of Installa | | | | | | | |
| | | | | | | | | |
| Name of Unit | Mfg. By | | | | | | | |
| All work, materials and construction to be in accordance with the rules and regulations of the Mechanical Codes of the Township of Radnor. Mechanical inspections require 24 hours notice minimum. Rough inspections required. Final inspections required for ALL permits. PERMITS ARE NOT TRANSFERABLE | | | | | | | | |
| Signature of Applicant Current Radnor Registration No | | | | | | | | |



301 Iven Avenue Wayne, PA 19087 P 610-688-5600 F 610-971-0450

RADNOR TOWNSHIP

Community Development Department Application for Electrical Permit

Electrical Plans are required for all work unless waived by Codes Official

PERMITS ARE NOT TRANSFERABLE

| Date Issued |
|-------------------------------|
| |
| Permit No.: |
| Fee: |
| **Include \$4.50 PA Surcharge |
| and \$2.00 Administrative Fee |

| www.radnor.com | | | IMMOLLIMADE | · La | | | | | |
|--------------------------------|--|---------|---------------------------------------|-------|--------|--|--|--|--|
| Job Location | Address: | | | | | | | | |
| Property Owner | Name: | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | Address: | | | | | | | | |
| , | Phone: | | Fax: | 100 | | | | | |
| Electrical Contractor | Name: | | | | A | | | | |
| | Address: | | | | | | | | |
| | Phone: | | Cell: | | Email: | | | | |
| Inspection Agency | United Inspection Agency | | | | | | | | |
| Name of Inspector | 44,1 | | | | | | | | |
| Residential 🗆 | Commercial 🗆 | Institu | ıtional □ | Other | | | | | |
| Cost of Work: | | | | | | | | | |
| Description of work includi | ing number of device | es: | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | • | | | | | |
| All work, materials and constr | | | | | | | | | |
| | or a maked marked that the second control of | | | 1 | | | | | |

All work, materials and construction to be in accordance with the rules and regulations of the Electrical Codes of the Township of Radnor. Rough and Final Inspections are required for ALL permits, by the approved Inspection Agency.

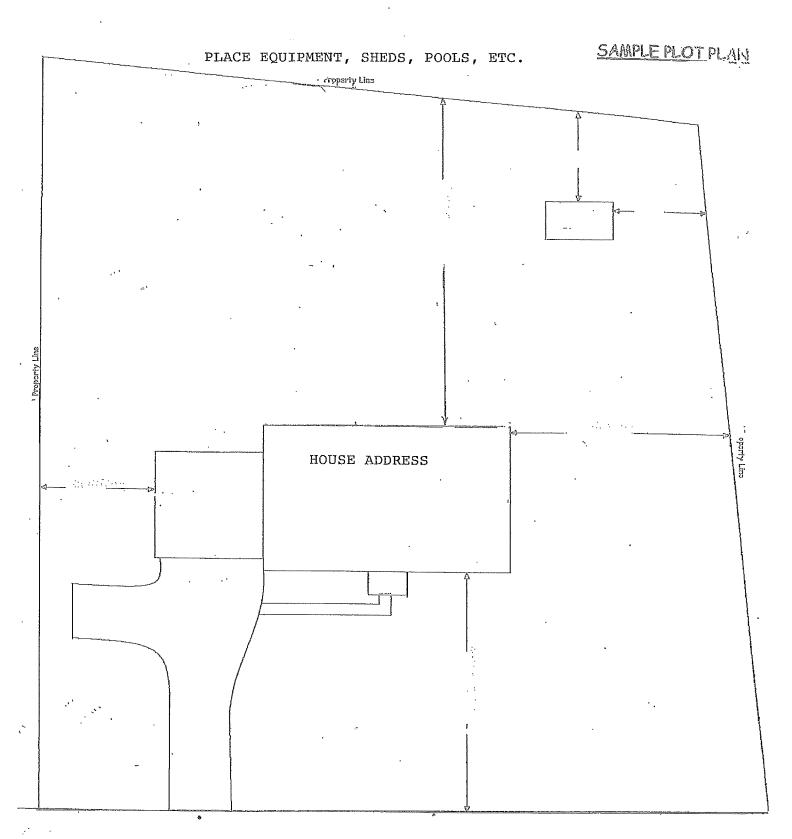
| Signature of Master Electrician | Current Registration No. |
|---------------------------------|--------------------------|
| | Current Registration No. |



RADNOR TOWNSHIP Community Development Department Application for Plumbing Permit

| Permit No | | | | | | | | | |
|-------------------------------|--|--|--|--|--|--|--|--|--|
| Fee | | | | | | | | | |
| **Include \$4.50 PA Surcharge | | | | | | | | | |
| and \$2.00 Administrative Fee | | | | | | | | | |

| Job Location | Address:_ | | | | | | | | | | |
|---|--|-----------|--------------|---------------|------------|-----------|--------|--|--|--|--|
| | Name: | | | | | | | | | | |
| Property Owner: | Name:Address/Zip: | | | | | | | | | | |
| . , | 1 | | | | | | | | | | |
| | Phone: Email: Name: Email: | | | | | | | | | | |
| Plumbing | 1 | | | | | | | | | | |
| Contractor: | | | | | | | | | | | |
| Residential Con | nmercial | _ | onal | | | | | | | | |
| | ration | | Jilai [] | Other | | | | | | | |
| | Yard | Basement | 1st Floor | 2nd Floor | 3rd Floor | 4th Floor | Total: | | | | |
| Water Closet | | | | | 0.4.1.001 | 141111001 | Totali | | | | |
| Urinals | | | | | | | | | | | |
| Bath Tubs | | | | | | | | | | | |
| Showers | | | | | | | | | | | |
| Sinks | | | | | | | | | | | |
| Garbage Disposal * | | | | | | | | | | | |
| Dishwasher * | | | | | | | | | | | |
| Utility Sink | | | | | | | | | | | |
| Auto Clothes Washer | | | | | | | | | | | |
| Sewer Ejector Pump * | | | | | | | | | | | |
| Hot Water Heater * | | | | | | | | | | | |
| Water Service * | | | | | | | | | | | |
| Sewer Connection* | | | | | | | | | | | |
| Gas Fixtures * | | | | | | | | | | | |
| Other | | | | | | | | | | | |
| | | | | | | | | | | | |
| Total: | | | | | | | | | | | |
| * Additional Fee | | | | | | | | | | | |
| Is connection to be made v | vith Sewer | ☐ On Site | . 🗆 | | | | | | | | |
| Size of House Drain of Bui | lding | | | | | | | | | | |
| Size of Soil Pipe | | | Size of Vent | t Pipe | | | | | | | |
| All work, materials and construction to be in accordance with the rules and regulations of the Plumbing Codes of the Township of Radnor. Plumbing inspections require 24 hours notice minimum. Rough inspections required. Final inspections required for ALL permits. PERMITS ARE NON-TRANSFERABLE | | | | | | | | | | | |
| Signature of (Master) Plum | nber | | | Current Regis | tration No | | | | | | |
| | | | | | | | | | | | |





Increase of Natural Gas Load

The information contained on this form is required to process your request to increase your natural gas load. Please complete this form and return as follows:

| Delaware, York, & Chester Counties & 1060 W. Swedesford Rd, Berw OR FAX to 610-648-7771 delchesterserviceapplications@exelor | yn, PA. 19312 | Bucks & Montgomery counties mail to: 400 Park Av, Warminster, PA. 18974 OR FAX to 215-956-3240 bucksmontnewbusiness@exeloncorp.com | | | | | |
|--|---|--|--|--|--|--|--|
| QUESTIONS? CALL 1-800-454-410 | 0 | QUESTIONS? CALL 1-800 | 454-4100 | | | | |
| From: | | | | | | | |
| Phone: | | | | | | | |
| Please provide the following infollocation of the gas service. | ormation for the | Note: If additional meter the billing information. | sets are required, please supp | | | | |
| Customer Info: \square Own Property \square | Lease Property | | | | | | |
| Square Footage of home | | | | | | | |
| Customer Name | | Contactor 's Name | | | | | |
| Service Address | | | | | | | |
| City, State, Zip | | | | | | | |
| Telephone | | | | | | | |
| Acct. Number | | Telephone | | | | | |
| | | E-Mail | | | | | |
| 2RESIDENTIALC | OMMERCIAL | 3. Type of Business: (COMME | RCIAL ONLY) | | | | |
| ☐ Separation of piping (need add | ditional meter set (s)) | ☐ Retail Store ☐ Institutional | | | | | |
| ☐ New Increase in Load | (), | ☐ Office/Commercial | ☐ Governmental | | | | |
| ☐ New Increase in Pressure | | ☐ Restaurant | ☐ Industrial | | | | |
| _ | | ☐ Warehouse | ☐ Other | | | | |
| | LED APPLIANCES WIT neating load" Be added (i.efryer, grills)? Please prov | HOUT FIRST CONSULTING WITH A e.: furnace, boiler, IR heater, rooftop heat vide the BTU input for EACH PIECE of equip | PECO REPRESENTATIVE** er)? Will "process load" be oment to be installed. | | | | |
| New New | Btu Input | Existing (Boiler, Furnace, WH, Grill) | BTU Input | | | | |
| Sample: Pool Heater | 400,000 BTU's | Sample: Furnace | 100,000 BTU's | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| TOTAL NEW | | | | | | | |
| TOTAL NEW | | TOTAL EXISTING | | | | | |
| 5. WHICH NATURAL GAS DELIVERY PRESS LOW 6" w.c. (0.21 PSIG) | | | ☐ 10 PSIG ☐ LINE | | | | |

REV 12/12/17