

**TOWNSHIP OF NORTH FAYETTE  
DEPARTMENT OF COMMUNITY DEVELOPMENT**

**GUIDE FOR OPENING A NEW BUSINESS**

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**Opening a new business without any construction work or change of use**

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\*Construction work does not include painting, carpeting, desks, counter tops, replacing bathroom fixtures or new cabinetry. Construction work does include removing any walls or constructing new walls (whether they are load bearing or not).

\*Some examples of changing the use are: office to a restaurant or store, a store to a restaurant, restaurant to storage, or school to office.

Please submit the following information to apply for a new business occupancy permit:

- **Completed Permit Application:** Check off “Zoning” and “Business Occupancy” at the top and provide a detailed description of the business activities under “description of work”. Include the business name.
- **Floor Plan:** The floor plan does not need to be drawn by an Architect but must be legible, show rooms, means of egress facilities, and any other important information. (See sample floor plan attached.)
- **Fire System Test and Inspection Report(s):** If the building and/or space is equipped with a sprinkler, fire alarm (horns/strobes, pull stations, etc.), or kitchen hood suppression system, the most recent test/inspection reports must be submitted with the application. **Note:** sprinkler and fire alarm test reports must be dated within the past year and kitchen suppression systems within the past 6 months.
- **Fees:** \$30 zoning permit fee and \$200 occupancy permit fee = \$230 total fee. Please make check payable to “North Fayette Township”.
- After review and approval, a **zoning permit** will be issued. Upon permit issuance, a **fire safety inspection** of the premises will need to be scheduled when you are ready. Scheduling information will be printed on the back of the zoning permit.
- Please note that a Knox box is required for fire department access.
- Please complete a Police Department Business Emergency Listing Form and return to the Police Department or Inspector.
- Upon successful completion of the fire safety inspection, the occupancy permit will be issued.

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**No-Impact Home-Based Business Registration and Certificate of Compliance**

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\*To be eligible for a no-impact home-based business there may not be any customer, client, or vehicular traffic and no pick-up or delivery from the home related to the business. If there will be any of these activities, you will need to speak with the Community Development Director regarding requirements for a Home Occupation.

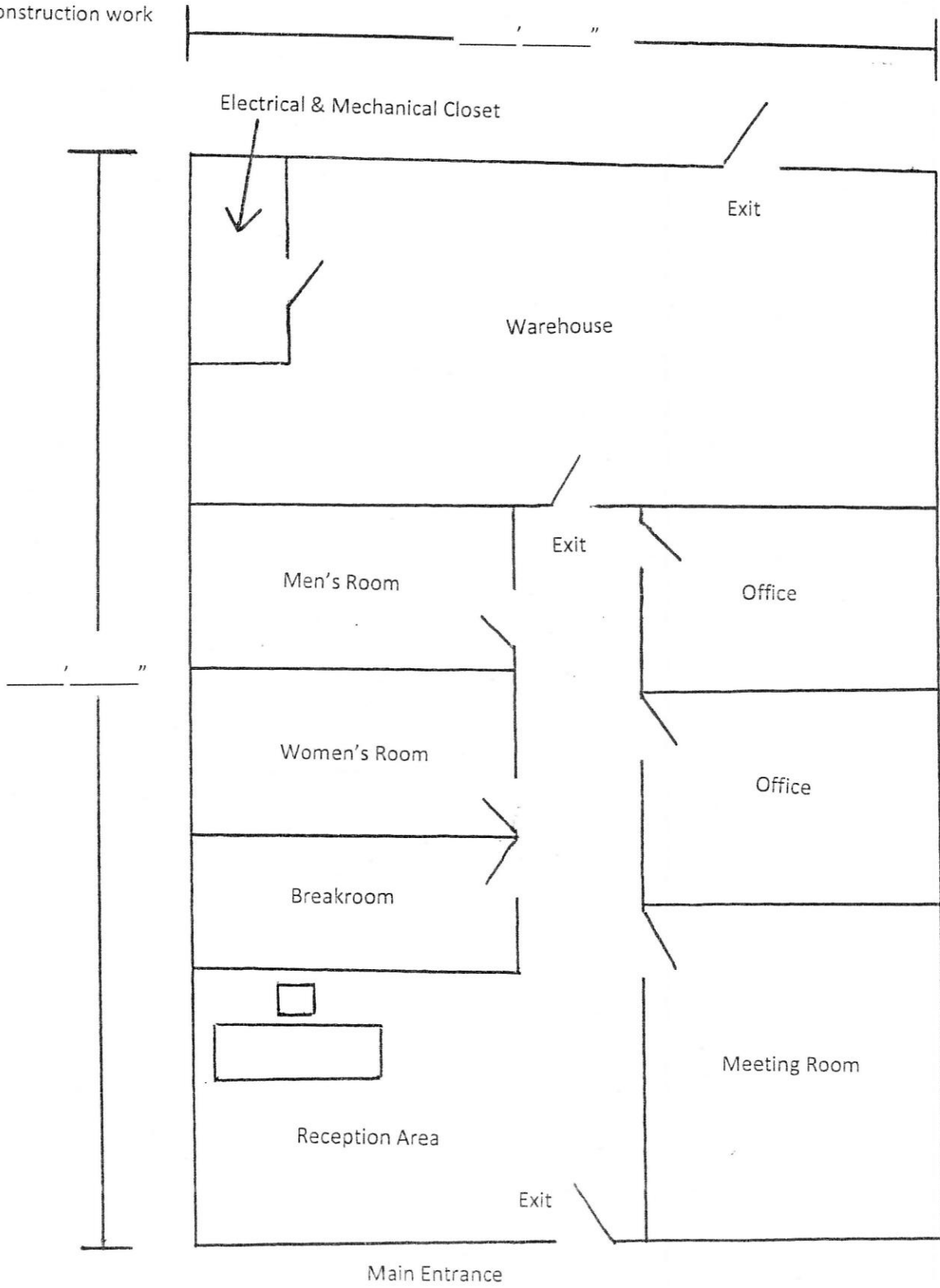
Please submit the following information to apply for a No-Impact Home-Based Business Certificate of Compliance:

- **Completed Permit Application:** Check off “Zoning” and “Business Occupancy” at the top and provide a detailed description of the business activities under “description of work”. Include the business name.
- **Fees:** \$30 zoning permit fee and \$200 occupancy permit fee = \$230 total fee. Please make check payable to “North Fayette Township”.
- Upon approval of the no-impact home-based business request, a Certificate of Compliance will be issued.

# SAMPLE FLOOR PLAN

No change of use

No construction work



Square Footage: \_\_\_\_\_ sq'



# North Fayette Township Police Department

400 North Branch Road  
Oakdale, PA15071-9362

Phone: 412-787-8900 Fax: 724-693-9814

Website: [www.north-fayette.com](http://www.north-fayette.com)

Mark O'Donnell  
*Chief of Police*



## BUSINESS EMERGENCY LISTING

Company

Street Address

City  State  Zip Code

Phone #  Additional  Fax

Business Hours  Number of Entrances

E-mail Address

Average number of employees: Daylight  Afternoon  Midnight

Type of alarm system:  Burglar  Fire  Medical  Panic  None  Other (specify)

Alarm Company  Phone Number

Pa. Crimes Code Section 7511 (c)(i). Control of alarm and automated dialing devices. Each business is permitted 3 false alarms within a 12 month period. Any thereafter will result in a fine (less than \$300.00).

Contact person during daylight (manager):

Name  Phone #

AFTER HOURS CONTACT:

Name  Home Phone #  Other

Name  Home Phone #  Other

Name  Home Phone #  Other

Name  Home Phone #  Other

Please list any hazardous chemicals on site and the location of such chemicals to assist our first responders:

Please list any workers at the above location that have any type of disability and the disability in order to assist on an emergency evacuation of the premises:

This form can also be completed online, at website <http://www.north-fayette.com>. Click Government Tab, click Police, click Police Forms and finally Business Emergency Listing Form. It will then be automatically e-mailed to our office.

The North Fayette Township Police Department would like to thank you for taking the time to update our data so that in an event of an emergency we can offer the best response approach!

**NORTH FAYETTE TOWNSHIP  
WEST ALLEGHENY SCHOOL DISTRICT  
LOCAL SERVICE TAX OFFICE  
400 NORTH BRANCH ROAD  
OAKDALE, PA 15071  
PHONE 724.693.9190 FAX 724.693.8132  
EMAIL: NFTAXOFFICE@GMAIL.COM**

**LOCAL SERVICES TAX REGISTRATION**

To comply with Act 511 of The Pennsylvania State Legislature (and the law in your local taxing district), you are required to answer the following questions. All information will be held in strict confidence.

TRADE NAME: \_\_\_\_\_

FEDERAL EMPLOYER ID NUMBER: \_\_\_\_\_

NAME(S) OF THE OWNER(S): \_\_\_\_\_  
\_\_\_\_\_

PAYROLL CONTACT: \_\_\_\_\_

BUSINESS TELEPHONE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: \_\_\_\_\_

CORRECT TAXING JURISDICTION: (Name of Township or Borough where business is located): \_\_\_\_\_  
\_\_\_\_\_

EMPLOYER BUSINESS LOCATION (Street address within PA-No PO Box, RD or RR) \_\_\_\_\_  
\_\_\_\_\_

MAILING ADDRESS WHERE ALL FORMS ARE TO BE SENT: \_\_\_\_\_  
\_\_\_\_\_

NUMBER OF EMPLOYEES: \_\_\_\_\_ (Include both full and part-time)

TYPE OF BUSINESS: \_\_\_\_\_

DATE BUSINESS STARTED: \_\_\_\_\_ (Month and Year)

I HEREBY CERTIFY THAT ALL INFORMATION AND STATEMENTS HEREIN ARE TRUE AND CORRECT.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

*You are entitled to receive a written explanation of your rights with regard to the audit, appeal, enforcement, refund and collection of local taxes by calling Jordan Tax at 724-731-2300 during the hours of 8:00 AM through 4:30 PM, Monday through Friday. If Jordan Tax is not the appointed tax hearing officer in your taxing district, you must contact your taxing district about the proper procedures and forms necessary to file an appeal.*