

# CONSTRUCTION/BUILDING PERMIT

PERMIT # WMT-5-25

EUGENE SHEMAN SIK

Name/Owner

233 MOREA RD, FRACKVILLE

Site Location

Date Issued

WEST MAHANDY TWP

Municipality

## INSPECTIONS REQUIRED FOR THIS PROJECT:

- Footing
- Foundation/Drainage
- Damp Proofing Under Slab
- Under Slab Plumbing
- Rough-Frame w/Fire caulk
- Insulation
- Wallboard
- Electrical
- Service
- Plumbing Rough/Final
- Accessibility Inspection
- Mechanical Rough/Final
- FINAL
- Rough
- Final

Description of Work:

INSTALL A 6.15 KW  
ROOF-MOUNTED  
SOLAR SYSTEM

for b r # 5242  
BUILDING OFFICIAL

**This notice shall be posted conspicuously at the work site and shall remain so until issuance of certificate.**

- FOR INSPECTIONS CALL JEFF at 570-621-8425

PERMIT APPLICATION

Non UCC \_\_\_\_\_

Page 1 of 2

**Building Permit** WMT-5-25 **Fire Protection Permit** \_\_\_\_\_  
Municipality West Mahanoy Township County Schuylkill  
Construction Site Location 233 Morea Rd, Frackville, PA 17931 Date Received 4/25/25  
Owner Eugene Shemansik Tenant \_\_\_\_\_  
Address 233 Morea Rd Address \_\_\_\_\_  
City Frackville State PA Zip 17931 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # (570) 205-2085 Cell # \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
Email shemansik@yahoo.com Email \_\_\_\_\_

Describe Proposed Work in Detail: Installation of a 6.15 kW roof mounted solar system with (15) 410 Watt panels and (1) 5.7kW inverter.

**BUILDING PERMIT**

Contractor Trinity Solar  
(if owner put same as above)  
Address 300 Corporate Drive  
City Reading State PA Zip 19605  
Phone # 484-525-4111 x9905 Cell # \_\_\_\_\_  
Email permits.pa@trinity-solar.com  
HIC # PA-128551  
Federal Employee# 2-23292324  
(Certification of Insurance for Worker Compensation needed or sign exemption form)  
State Classification  
New Residential \_\_\_\_\_ Other Residential x  
New Commercial \_\_\_\_\_ Other Commercial \_\_\_\_\_  
Other: \_\_\_\_\_  
Estimate Total Costs For All Work: \$666.04

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**FIRE PROTECTION PERMIT**

Contractor \_\_\_\_\_  
(if owner put same as above)  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
Email \_\_\_\_\_  
HIC # \_\_\_\_\_  
Federal Employee# \_\_\_\_\_  
(Certification of Insurance for Worker Compensation needed or sign exemption form)  
State Classification  
New Residential \_\_\_\_\_ Other Residential \_\_\_\_\_  
New Commercial \_\_\_\_\_ Other Commercial \_\_\_\_\_  
Sprinkler System: \_\_\_\_\_  
Alarm System: \_\_\_\_\_  
Commercial Cooking Equip.: \_\_\_\_\_  
Other: \_\_\_\_\_  
Estimate Total Costs For All Work: \_\_\_\_\_

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**I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.**

Signature: *Rebecca Probert*  
Owner ( ) Contractor ( )  Owner Representative ( )

**CODE OFFICIAL USE ONLY**

UCC Building Fee: \$ 100  Plans Approved  
Plan Review Fee: \_\_\_\_\_ FP Fee: \_\_\_\_\_  Plans Approved with Comments  
Admin Fee: \$ 20 Code Official: JEFF FARRO  
State Fee: \$ 4.50 State Cert. #: 5242  
Total Cost: \$ 124.50 Date: 4/29/25  
**TOTAL FOR ALL FEES: \$ 484.50**

**PERMIT APPLICATION**

Non UCC \_\_\_\_\_

Page 2 of 2

**Mechanical Permit** \_\_\_\_\_ **Plumbing Permit** \_\_\_\_\_ **Electrical Permit** \_\_\_\_\_

Municipality West Mahanoy Township County Schuylkill

Construction Site Location 233 Morea Rd, Frackville, PA 17931 Date Received 4/25/25

Owner Eugene Shemansik Tenant \_\_\_\_\_

Address 233 Morea Rd Address \_\_\_\_\_

City Frackville State PA Zip 17931 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone # (570) 205-2085 Cell # \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Email shemansik@yahoo.com Email \_\_\_\_\_

Describe Proposed Work in Detail: Installation of a 6.15 kW roof mounted solar system with (15) 410 Watt panels and (1) 5.7kW inverter.

**MECHANICAL / PLUMBING PERMIT**

Contractor \_\_\_\_\_ (if owner put same as above) Water: Public \_\_\_\_\_ On-lot \_\_\_\_\_  
 Sewer: Public \_\_\_\_\_ On-lot \_\_\_\_\_

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Phone # \_\_\_\_\_ Cell # \_\_\_\_\_  
 Email \_\_\_\_\_  
 HIC # \_\_\_\_\_

Technical Site Data		Technical Site Data		Technical Site Data	
No.	Size	Fixture/Equip.	No.	Size	Fixture/Equip.
_____	_____	Water Closet	_____	_____	Boiler Furnace
_____	_____	Urinal/Bidet	_____	_____	Sewer Lat/Conn
_____	_____	Bathub	_____	_____	Backflow Prev.
_____	_____	Lavatory	_____	_____	HVAC
_____	_____	Shower	_____	_____	Kitchen Hood &
_____	_____	Sink	_____	_____	Exhaust System
_____	_____	Dishwasher	_____	_____	Refrig. Units
_____	_____	Washing Mach.	_____	_____	Heat Pumps
_____	_____	Hose Bib	_____	_____	Fire Dampers
_____	_____	Water Heater	_____	_____	Water Connect.

Federal Employee# \_\_\_\_\_  
 (Certification of Insurance for Worker Compensation needed or sign exemption form)

State Classification \_\_\_\_\_  
 New Residential \_\_\_\_\_ Other Residential \_\_\_\_\_  
 New Commercial \_\_\_\_\_ Other Commercial \_\_\_\_\_

Estimate Total Costs For All Work: \_\_\_\_\_ Others: \_\_\_\_\_

**ELECTRIC PERMIT**

Contractor Text Trinity Solar (if owner put same as above)

Address 300 Corporate Drive  
 City Reading State PA Zip 19605  
 Phone # 484-525-4111 x9905 Cell # \_\_\_\_\_  
 Email permits.pa@trinity-solar.com  
 HIC # PA-128551

Technical Site Data		Technical Site Data		Technical Site Data	
No.	Size	Fixture/Equip.	No.	Size	Fixture/Equip.
_____	_____	Lighting Fixture	_____	_____	Range
_____	_____	Receptacles	_____	_____	Dishwasher
_____	_____	Switches	_____	_____	Garbage Disp.
_____	_____	Detectors	_____	_____	HVAC
_____	_____	Motor-Fraction.	_____	_____	Emergency &
_____	_____	Comm. Devices	_____	_____	Exit Lights
_____	_____	Alarm Dev./Sys.	_____	_____	Heater
_____	_____	Pool Bonding.	_____	_____	Central AC Unit
_____	_____	Service	_____	_____	Signs
_____	_____	Sub-Panels	_____	_____	Survey Fee.

Federal Employee# 2-23292324  
 (Certification of Insurance for Worker Compensation needed or sign exemption form)

State Classification \_\_\_\_\_  
 New Residential \_\_\_\_\_ Other Residential X  
 New Commercial \_\_\_\_\_ Other Commercial \_\_\_\_\_

Estimate Total Costs For All Work: \$21,535.46 Others: Roof mounted solar panels (15)

**I hereby acknowledge that I have read this application and state the above is correct to comply with all Municipal ordinances and state laws regarding construction.**

Signature: Rubena Kolesnik  
 Owner ( ) Contractor ( ) Owner Representative ( )

**CODE OFFICIAL USE ONLY**

Mechanical	Plumbing	Electrical	<input type="checkbox"/> Plans Approved
_____	_____	<u>\$ 300</u>	<input type="checkbox"/> Plans Approved with Comments
UCC Building Fee:	_____	_____	
Plan Review Fee:	_____	_____	
Admin Fee:	<u>\$ PAID</u>	<u>\$ 60</u>	Code Official: <u>JEFF FARRO</u>
State Fee:	_____	_____	State Cert. #: <u>5242</u>
Total Cost:	_____	<u>\$ 360</u>	Date: <u>4/29/25</u>
Non-UCC Fee:	_____	_____	