

PENN FOREST TOWNSHIP

2010 State Route 903, Jim Thorpe, PA 18229
(570) 325-3160

PERMIT FEE: \$50.00 must be paid at time of application – CASH _____ CHECK # _____

ZONING PERMIT APPLICATION COMPLETE ALL SECTIONS

(1) OWNER(s) INFORMATION:

Name _____ Phone Number _____

Mailing Address _____

City _____ State _____ Zip _____

(2) APPLICANT(s) INFORMATION:

(If different from the owner)

Name _____ Phone Number _____

Mailing Address _____

City _____ State _____ Zip _____

(3) PROPERTY INFORMATION:

Lot _____ Section _____ Development _____

Street _____ Vacant () Yes () No

Lot Width _____ Lot Length _____ Total Acreage _____

Present Use: _____ ** Tax Parcel # _____ **REQUIRED ****

Estimated Cost of Project: _____

New 911 (HOME) Address: _____

(4) ZONING PERMIT REQUESTED FOR:

- | | | | |
|---------------------|--------------|------------|-------------------------------------|
| 1 () Dwelling | 2 () Garage | 3 () Shed | 4 () Porch/Deck/Patio (circle one) |
| 5 () Addition | 6 () Other | 7 () Pool | 8 () Commercial Building |
| 9 () Change of Use | | | |

*****COMPLETE THE APPLICABLE DESCRIPTION SECTION ON PAGES 2, 3 and 4 *****

PLEASE DO NOT WRITE BELOW THIS LINE

ZONING OFFICER'S USE ONLY

ZONING DISTRICT: () R-1 () R-2 () R-3 USE CLASS: () 1 () 2 () 3

() C-1 () C-2 () I-1 Other: _____

DATE ISSUED: _____

ZONING PERMIT #: _____

ZONING OFFICER: _____

DESCRIPTION - Please fill in the area that pertains to your application

#1 NEW DWELLING:

Length _____ Width _____ Height _____ Total Square Feet _____

Number of Bedrooms _____ Number of Stories _____ Number of Families _____

Sewage Permit # _____ Date issued/installed _____

#2 GARAGE:

() Attached () Unattached - Distance from primary dwelling _____

Length _____ Width _____ Height _____ Total Square Feet _____

Utilities: Electric () Yes () No
Water () Yes () No
Sewage () Yes () No
Heat, Ventilation or Air Conditioning () Yes () No

If you answered "No" to all of the utilities listed above and it is less than one thousand (1000) square feet, you will only receive a Preliminary Zoning Permit until your garage is completed. After your garage is completed, you must contact the Zoning Officer to do a final inspection. If your garage is built in accordance with this Zoning Permit Application and the Preliminary Zoning Permit, the Zoning Officer will issue a Final Zoning Permit.

#3 SHED:

Length _____ Width _____ Height _____ Total Square Feet _____

Utilities: Electric () Yes () No
Water () Yes () No
Sewage () Yes () No
Heat, Ventilation or Air Conditioning () Yes () No

If you answered "No" to all of the utilities listed above and it is less than one thousand (1000) square feet, you will only receive a Preliminary Zoning Permit until your shed is completed. After your shed is completed, you must contact the Zoning Officer to do a final inspection. If your shed is built in accordance with this Zoning Permit Application and the Preliminary Zoning Permit, the Zoning Officer will issue a Final Zoning Permit.

#4 DECK / PORCH / PATIO: (CIRCLE ONE)

Length _____ Width _____ Height _____ Total Square Feet _____

#5 ADDITION:

Length _____ Width _____ Height _____ Total Square Feet _____

Number of Bedrooms _____

#6 OTHER:

Length _____ Width _____ Height _____ Total Square Feet _____

Description: _____

#7 POOL:

() Inground () Above ground

Length _____ Width _____ Depth _____

#8 COMMERCIAL BUILDING:

Length _____ Width _____ Height _____ Total Square Feet _____

Number of Stories _____ Number of Units _____ Total Acreage _____

Nature of Business: _____

Penn Forest Township Planning Commission Approval

() Yes - Date approved _____
() No

Penn Forest Township Board of Supervisors Conditional Approval

() Yes - Date approved _____
() No

#9 CHANGE OF USE:

Present/Past Use: _____

Proposed Use: _____

<p>A PLOT PLAN/DIAGRAM MUST BE INCLUDED WITH THIS APPLICATION, PLEASE INCLUDE THE FOLLOWING:</p> <ol style="list-style-type: none"> 1. <i>Indicate length of all property lines.</i> 2. <i>Show all structures on property and the distanced from the structure to the property lines.</i> 3. <i>Indicate name of streets abutting property.</i> 4. <i>Show driveway location.</i> 5. <i>Indicate the location of the well and septic system.</i> 6. <i>Locate and mark all property pins.</i> 7. MARK LOT PROPERTY PRIOR TO SUBMITTING ZONING APPLICATION.
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IF YOU ARE PROPOSING AN EARTH DISTURBANCE ACTIVITY THAT INVOLVES ONE (1) ACRE OR MORE, AN EROSION CONTROL PLAN WILL BE REQUIRED FOR THE PROJECT THAT WILL NEED TO BE REVIEWED AND DEEMED ADEQUATE BY THE CARBON COUNTY CONSERVATION DISTRICT ("CCCD"). YOU SHOULD CONTACT THE CCCD AT (610-377-4894) PRIOR TO COMMENCING THE EARTH DISTURBANCE ACTIVITY

INITIAL _____ OVER ONE (1) ACRE OF EARTH DISTURBANCE.

INITIAL _____ UNDER ONE (1) ACRE OF EARTH DISTURBANCE.

PLEASE NOTE THE FOLLOWING:

1. This permit is VOID within one year of the date of issue, unless work has started.
2. This permit applies to ZONING only and shall not relieve the applicant/property owner from obtaining such other permits as may be required by law.
3. Violation of any provision of the Zoning Ordinance or this permit, by the owner, lessee, or any other person shall be punishable by a fine of not more than \$500.00, each day that a violation continues may constitute a separate violation.
4. This is NOT a Building Permit. If a Building Permit is required, no construction of any kind may begin until a Building Permit has been issued by the Building Inspector.
5. No construction of any kind may begin until all other necessary permits have been issued by the appropriate local and state authorities.

Application is hereby made for a permit to erect or alter a structure which shall be located as shown on the attached diagram/plot plan and/or to use the premises for the purposes herewith. The information which precedes, together with the plot plan/diagram, is made part of this application by the undersigned. It is understood and agreed by the applicant that any error, misstatement or misrepresentation of material, fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application or any change in the location, size or use of structure or land made subsequent to the issuance of this permit without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit.

APPLICANT'S SIGNATURE: _____ DATE: _____

**PLEASE DO NOT WRITE BELOW THIS LINE
ZONING OFFICER'S USE ONLY**

PERMIT DENIED: DATE: _____

REASON FOR DENIAL:

APPLIED TO ZONING HEARING BOARD: DATE: _____

ZONING HEARING HELD: _____

HEARING NUMBER: _____

SPECIAL EXCEPTION USE: _____ Yes _____ No

APPEAL: _____ Yes _____ No

ZONING HEARING BOARD'S DECISION: _____ Approved _____ Denied

ORDER:

