

FAIRVIEW TOWNSHIP, LUZERNE COUNTY PENNSYLVANIA

ZONING PERMIT APPLICATION

[A Zoning Permit Application must be filed prior to the Building Permit Application]

This application is being made for a permit to use land or a structure, or construct, alter, or demolish a structure in the location shown on the attached sketch plan. The information and the sketch plan that follow are considered part of this application. Any error, misstatement or misrepresentation of material fact in this application or the location, size or use of land or structure, whether intentional or not, that, if known by the Zoning Officer at the time of issuance of the zoning permit would result in denial of the application, shall constitute a reason for the issuance of a stop work order and revocation of the zoning permit.

SECTION 1. PROPERTY LOCATION AND OWNERSHIP INFORMATION:

A. Property Address and Location: _____

B. Deed Owner and Address: _____

Contact Number: (_____) _____ - _____

C. Deed Book: _____ Page: _____ Property Identification No. _____

D. Zoning District: _____

SECTION 2. APPLICANT INFORMATION, IF DIFFERENT THAN OWNER:

A. Applicant's Name and Address: _____

Contact Number: (_____) _____ - _____

B. Interest in Property:

Record Owner Tenant Buyer Under Agreement of Sale

Option Holder Other _____

SECTION 3. CONTRACTOR INFORMATION, IF SOMEONE OTHER THAN OWNER IS DOING THE WORK:

A. Contractor's Name and Address: _____

Contact Number: (_____) _____ - _____

B. Insurance Information:

- Proof of worker's compensation insurance is attached.
- Notarized affidavit verifying no employees is attached.
- Proof of general liability insurance is attached.

C. Pennsylvania Contractor Registration No. _____

SECTION 4. PRESENT USE OF PROPERTY:

A. Type of Use:

- Vacant Land Agricultural Commercial Industrial
- Single-Family Dwelling Two-family Dwelling Multi-family Dwelling
- Other _____

B. Size and Type of Existing Lot:

Width: _____ Length/Frontage: _____ Acres/Square Feet: _____

Corner Lot: Yes _____ No _____

C. Number of Existing Buildings and Structures on Lot: _____

SECTION 5. PROPOSED USE OF PROPERTY:

A. Type of Work, Structure and Use (check those that are applicable):

Type of Work	Type of Structure	Type of Use
<input type="checkbox"/> New	<input type="checkbox"/> Single-family Dwelling	<input type="checkbox"/> Residential
<input type="checkbox"/> Addition	<input type="checkbox"/> Two-family Dwelling	<input type="checkbox"/> Commercial
<input type="checkbox"/> Repair/Alteration/Change	<input type="checkbox"/> Multi-family Dwelling	<input type="checkbox"/> Industrial
<input type="checkbox"/> Demolition	<input type="checkbox"/> Manufactured Home	<input type="checkbox"/> Agricultural
<input type="checkbox"/> Other _____	<input type="checkbox"/> Accessory Structure <input type="checkbox"/> Sign <input type="checkbox"/> Shed <input type="checkbox"/> Garage <input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Non-residential Building	
	<input type="checkbox"/> Other _____	

B. Describe the type of work in detail: _____

C. Site plan. A site plan drawn to scale including the following must be attached to this application:

- (1) The exact size and location of existing and proposed structures on lot, including distances from structures to lot lines and other structures.
- (2) The number and type of structures on the lot.
- (3) The number and location of parking and loading spaces, if applicable.
- (4) The existing and proposed use of the lot.
- (5) The height of proposed structures.
- (6) The size and location of the lot and building setback lines and dimensions.
- (7) All streets and alleys bounding the lot.
- (8) All existing and proposed utilities, access drives, and easement, if any.

FAILURE TO PROVIDE A SITE PLAN WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.

D. Zoning Information. Please complete the following:

	Actual	Proposed
Zoning District		
Lot Size (square feet)		
Lot Width (feet)		
Lot Depth (feet)		
Building Setback (feet and inches)		
Front Yard		
Rear Yard		
Side Yard (left side from front)		
Side Yard (right side from front)		
Building Height (feet)		
Number of off-street parking spaces		
Lot Coverage (percentage)		

A. Use Information. Check whichever is applicable:

- Use of structure that has been altered, enlarged or moved
- Use of vacant land
- Change in use of land
- Change in use of building or structure

SECTION 6. OTHER CONSTRUCTION INFORMATION:

A. Type of sewer (attach a copy of the permit or approval):

- On-Lot

- Central or Public Sewage
- Other: _____

B. Stormwater Management (Plan Approval by Township or its Engineer):

Total area in square feet for new construction and impervious surface: _____

C. Start Date: _____ Completion Date: _____

D. Construction Costs: \$ _____

By signing below, the applicant and owner verify that the information contained in this application and the documents attached are true and correct to the best of his/her/their knowledge, information and belief. The applicant and owner understand that false statements made herein are subject to penalties of 18 Pa. C.S.A. Section 4904 relating to unsworn falsification to authorities. If the application is not signed by the owner, the applicant certifies that the applicant is authorized by the owner to make this application and the applicant agreed to inform the owner of the approval (with conditions if any) or denial of the application.

SIGNATURE OF APPLICANT

DATE

THE OWNER MUST SIGN THIS APPLICATION OR IT WILL BE DEEMED INCOMPLETE AND RETURN TO APPLICANT.

SIGNATURE OF OWNER

DATE

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OFFICIAL USE ONLY

Date Received: _____ Fee Paid: _____ Permit No. _____

APPROVED DENIED Date: _____

IF APPROVED, THE APPROVAL IS SUBJECT TO THE FOLLOWING CONDITIONS:

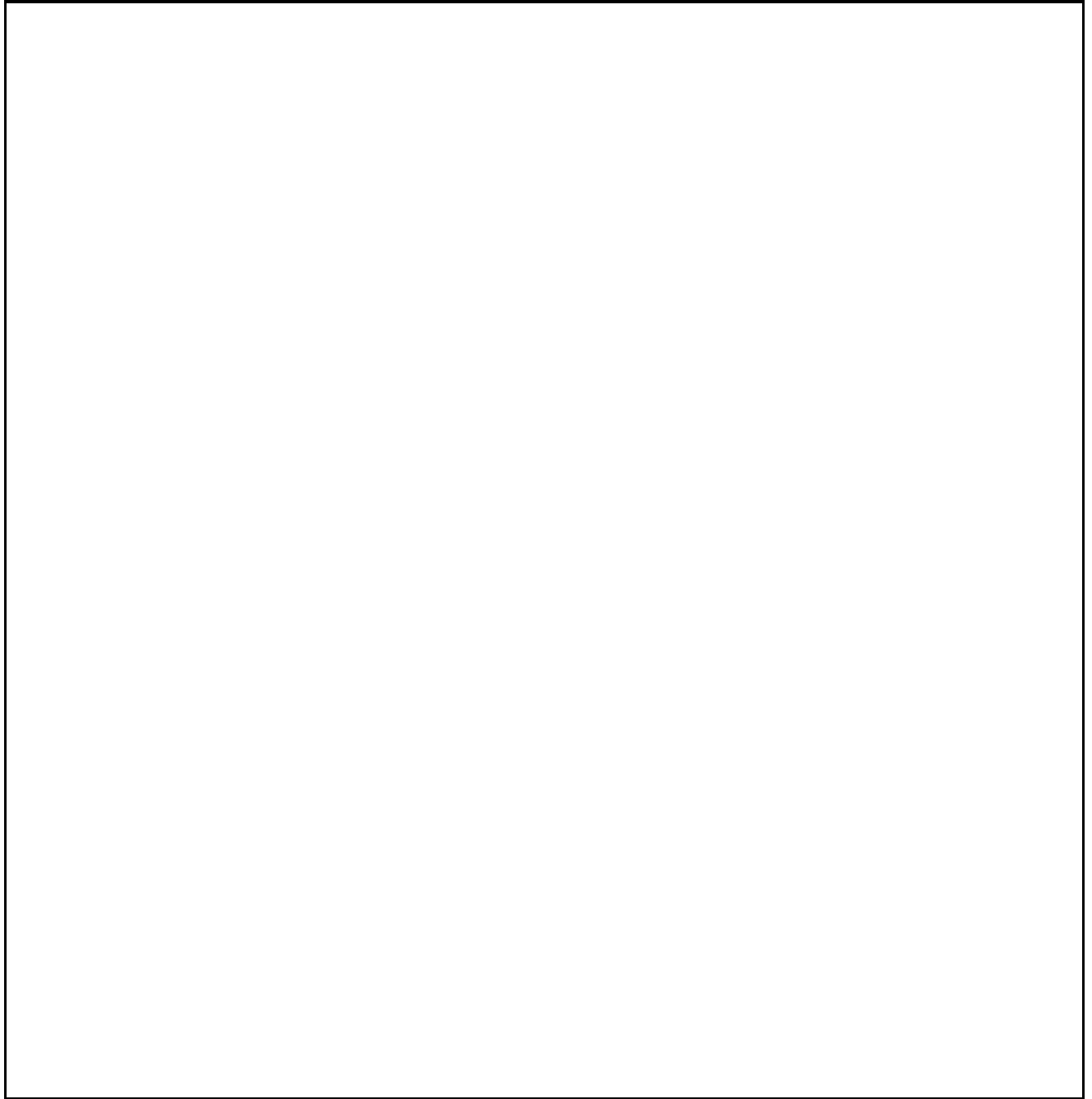
STORMWATER MANAGEMENT PLAN APPROVAL AND BUILDING PERMIT FROM BUILDING INSPECTOR.

IF DENIED, THE REASONS FOR DENIAL ARE AS FOLLOWS (ATTACH A COPY OF THE DENIAL LETTER TO THIS APPLICATION):

ZONING OFFICER

SKETCH PLAN

Indicate North



I will have the structure built and located in accordance with the dimensions indicated above.

Signature of Applicant

DATE