

**APPLICATION FOR ZONING PERMIT
NON RESIDENTIAL
Fairview Township**

Township Index# _____ County Tax Index# (21) _____ Permit# _____

WE, the undersigned, owners of their representative, of the following describe property, do hereby apply to you for a Certificate of Zoning and for such use, based on the information hereinafter set out. This application is made subject to the penalties of 18 Pa. C.S.A. § 4904 relating to unsworn falsification to authorities.

Address of Property for which application made _____

Owner(s) of Property _____ Phone # _____

Address of Property Owner(s) _____

Applicant's Name (if different) _____ Phone # _____

Applicant's Address _____
=====

Non-Residential Use Data: Zoning District _____

Lot Size: Road Frontage _____ Depth _____ Area _____ % Lot Coverage _____
=====

Improvement: (check one)

_____ New Construction _____ Addition _____ Interior Remodel _____ Demolition

Describe proposed structures and use of land (i.e. new commercial bldg., addition to, or Demolition of)

Area of Purposed Building _____ Existing Parking _____ Parking on Completion _____

Setbacks: Front Yard _____ Required _____ _____ Height (grade to highest point)

 Rear Yard _____ Required _____ Area _____ Sq.Ft. of proposed construction

 Side Yard _____ Required _____ Area _____ Sq.Ft. of floor space

Estimated Construction Cost: \$ _____ Permit Fee: \$ _____ Date: _____

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Has the Land Development Plan been approved and recorded? (If appl.): (Yes/No) Date of Recording _____

Are Land Development Plan requirements completed? (Yes/No)

If No, what remains to be completed. Attach a separate sheet of the remaining items to be completed.

Sidewalks are required to be constructed? (Yes/No)

Is Buffer/Planting Strip Required? (Yes/No) If Yes, Size: _____

Is 10' Green Strip along frontage Required? (Yes/No) Availability of Public Water (If. Appl.) _____

Sewer connection permit _____ (If Appl.) Septic Permit No. _____

Flood Plan Designation: _____ Lowest Floor El. If Appl. _____ Bluff Recession Setback Appl. (Yes/No)

Was a Zoning Hearing Board decision needed for this permit? _____ Denied/Approved _____

If the proposed building or structure is within 50 feet from the top of a stream bank and/or located within a wetland area, I will contact the Pennsylvania DEP and obtain permission to build prior to starting construction.

I hereby agree that all applicable provisions of the Fairview Township Codes shall be complied with.

Applicant's Signature: _____ Date: _____

-----OFFICE SPACE ONLY-----

Date of Approval or Denial _____ Reason: _____

Date of Expiration: _____ Zoning Officer Signature: _____

APPLICATION FOR ZONING PERMIT

PLOT PLAN

(Information to be supplied by Applicant)

SCALE 1" = _____ FEET

NOTE: If access to street proposed, the proposed access(es) must be set forth.

ADDRESS: _____ TOWNSHIP INDEX # _____