

APPLICATION ZONING CERTIFICATE – RESIDENTIAL
Fairview Township

Township Index # _____ County Tax Index #(21) _____ Permit # _____
WE, the undersigned, owners or their representative, of the following described 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 (if different): _____
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Zoning District: _____ Subdivision/Development: _____ Lot # _____

Lot Size: _____ Road Frontage _____ Depth _____ Area _____
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Improvement: (check one)

_____ New Dwelling _____ Addition (i.e. family room, enclosed porch, 2nd floor)

_____ Accessory Building (i.e. garage, shed) _____ Deck

_____ Interior Remodeling _____ 2-unit _____ Multi-Family _____ Other

Describe Construction (i.e. 16' x 16' addition to dwelling):

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_____ Stories _____ Dwelling units presently on lot: _____ Dwelling units on completion: _____

Proposed off Street Parking _____ Required off Street Parking on Completion _____

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

Rear Yard _____ Required _____ Total Sq.Ft. of lot coverage _____

Side Yard _____ Required _____ % of lot coverage _____

Sq.Ft. of new building floor space _____

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

Contractor/Builder Name: _____ Work's Comp. Insurance? _____

Contractor/Builder Address: _____ Phone # _____

APPLICATION FOR ZONING PERMIT – PAGE 2
RESIDENTIAL

If lot is in an approved Subdivision/Development, will approved grading plan be preserved? _____

If the lot is not within a development for which a grading plan has been approved, or the applicant is proposing a revision to a previously approved grading plan: Has a grading plan been submitted by applicant: _____

Has the grading plan been approved by Engineering?: _____ Date Approved: _____ Fee Paid? _____

Is an access to State Highway or Township street requested? _____

Submitted: Highway Occupancy Permit _____ Township Street Access Permit _____

Sidewalks are required to be constructed? _____(Yes/No) Availability of Public Water (If Appl.) _____

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

Flood Plain Designation: _____ Lowest Floor El. If Appl. _____ Bluff Recession Setback (Appl.)? _____

Was a Zoning Hearing Board decision needed for this permt? _____ Approved _____ Appeal # _____

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: _____

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Date of Approval or Refusal _____ 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# _____