



APPLICATION FOR ZONING PERMIT

Date Application Received: _____ Permit No.: _____

Property Address: _____ Lot & Block Number: _____

Property Owner's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Applicant's Name: _____

Phone: _____ Cell: _____

Email Address: _____

Proposed Use of Building/Structure: _____

Description of Construction: _____

Total Sq. Ft. of Construction: _____ Estimated Cost of Construction _____

Architect/Engineer Name: _____ Phone: _____

Address: _____ City/State/Zip _____

Builder Name: _____

Address: _____ City/State/Zip: _____

Phone: _____ Cell: _____

The above information is true and correct. I hereby agree that all applicable provisions of the Borough Codes shall be complied with, as well as the requirements of the municipal sewer and water authority whether specified or not.

APPLICANT/AGENT SIGNATURE

PRINT NAME

DATE

ZONING: APPROVED DENIED

BY: _____ DATE: _____ PERMIT FEE PAID _____

REASON(S) FOR DENIAL: _____