Clifton Township

361 State Route 435 Clifton Township PA 18424

Office: 570-842-4272 Email: Secretary@cliftontownship.com

Application for Outdoor Wood Furnace Permit

I/We hereby represent that the information provided herein, and on the plans and documents submitted herewith, is true and correct and request that a permit be issued in reliance thereon, and agree to comply with the Clifton Township Outdoor Wood Furnace Ordinance, as amended.

Name: Address: Telephone: Signature: nterest in Property Owner Tenan	Email: _					
Address:	Email: _					
Gelephone:Signature:	Email: _					
			_ Email:			
nterest in Froperty owner renam						
PROPERTY OWNER (if different than applicate	int)					
Name:						
Address:						
Telephone:	Email: _					
Signature:						
PROPERTY AND FURNACE LOCATION	•					
s the furnace EPA OWHH Phase I Program C	Qualified? Yo	es 🗌 No				
ot Size: Setbacks	Front: :	Side:	Side:	Rear: _		
Names of Owners or Principal Buildings with	າin 300 feet of Furn	ace:				
SITE PLAN						

Provide a site plan showing property lines, existing/proposed buildings, setbacks, buildings within 300 feet of furnace location, building height, and any additional information required to document compliance with the Outdoor Wood Furnace Ordinance.

MANUFACTURER'S MANUAL/INSTRUCTIONS

Applicant is required to produce the manufacturer's manual/instructions at the time of submission of this application.

APPLICANT:			
TOWNSHIP USE ONLY			
Application Receipt Date:	Fee: \$	Date Fee Received:	
Received By:			
ZONING OFFICER USE ONLY			
Permit APPROVED			
Permit DENIED			
The following deficiencies have b		· ,	
Date Applicant was Notified:			
Clifton Township Zoning Officer Signa	ature _	Date	