

# SUGARLOAF TOWNSHIP ZONING APPLICATION

Application # \_\_\_\_\_ Application Date \_\_\_\_\_ Zoning District \_\_\_\_\_ PIN# \_\_\_\_\_

Application for: New Structure \_\_\_\_\_ Repair/Alteration \_\_\_\_\_ Sign \_\_\_\_\_ Occupancy \_\_\_\_\_ Change of use \_\_\_\_\_ Pool \_\_\_\_\_ Mobile Home \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Email \_\_\_\_\_

Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Food Truck Fee: \_\_\_\_\_

Address: \_\_\_\_\_ Zoning Fee: \_\_\_\_\_

Specific work to be done: \_\_\_\_\_ UCC Fee: \_\_\_\_\_

Cost: \$ \_\_\_\_\_ (Please attach estimate/Quote). Sign Fee: \_\_\_\_\_

Contractor Name: \_\_\_\_\_ Phone # \_\_\_\_\_ Highway Occ. Fee: \_\_\_\_\_

Address: \_\_\_\_\_ PA Registration # \_\_\_\_\_ Occ Permit Fee: \_\_\_\_\_

Lot Size: \_\_\_\_\_ Lot Frontage: \_\_\_\_\_ (Feet) Lot Width: \_\_\_\_\_ (Feet) Change of Use Fee: \_\_\_\_\_

Proposed structure size: Frontage \_\_\_\_\_ Ft Depth \_\_\_\_\_ Ft Height \_\_\_\_\_ Ft Area \_\_\_\_\_ sq/ft Application Fee: \_\_\_\_\_

Water Supply: On-Lot \_\_\_\_\_ Municipal \_\_\_\_\_ Sewer: On-Lot \_\_\_\_\_ Municipal \_\_\_\_\_ **Total Fee:** \_\_\_\_\_

I hereby swear that the information that I have provided in this application is correct and that the work described will be completed as specified in this application. I agree and acknowledge that any deviation from this information may result in the stoppage of work by the Township and possible action taken against me. I further agree to follow all the rules and ordinances of Sugarloaf Township in so much as they relate to the steps necessary to satisfy this permit.

Please note: Permits for residential use do not automatically include the use as a home occupation, boarding or rooming house or any other business activity unless specifically authorized.

**A non-refundable application review fee of \$25.00 will be collected at the time of the permit application.  
This fee will be applied towards the final fee of the permit approval.**

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Approval

This zoning application is approved as completed by the applicant, agent or owner.

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_

## Denied

This zoning application is denied for the following reason(s):

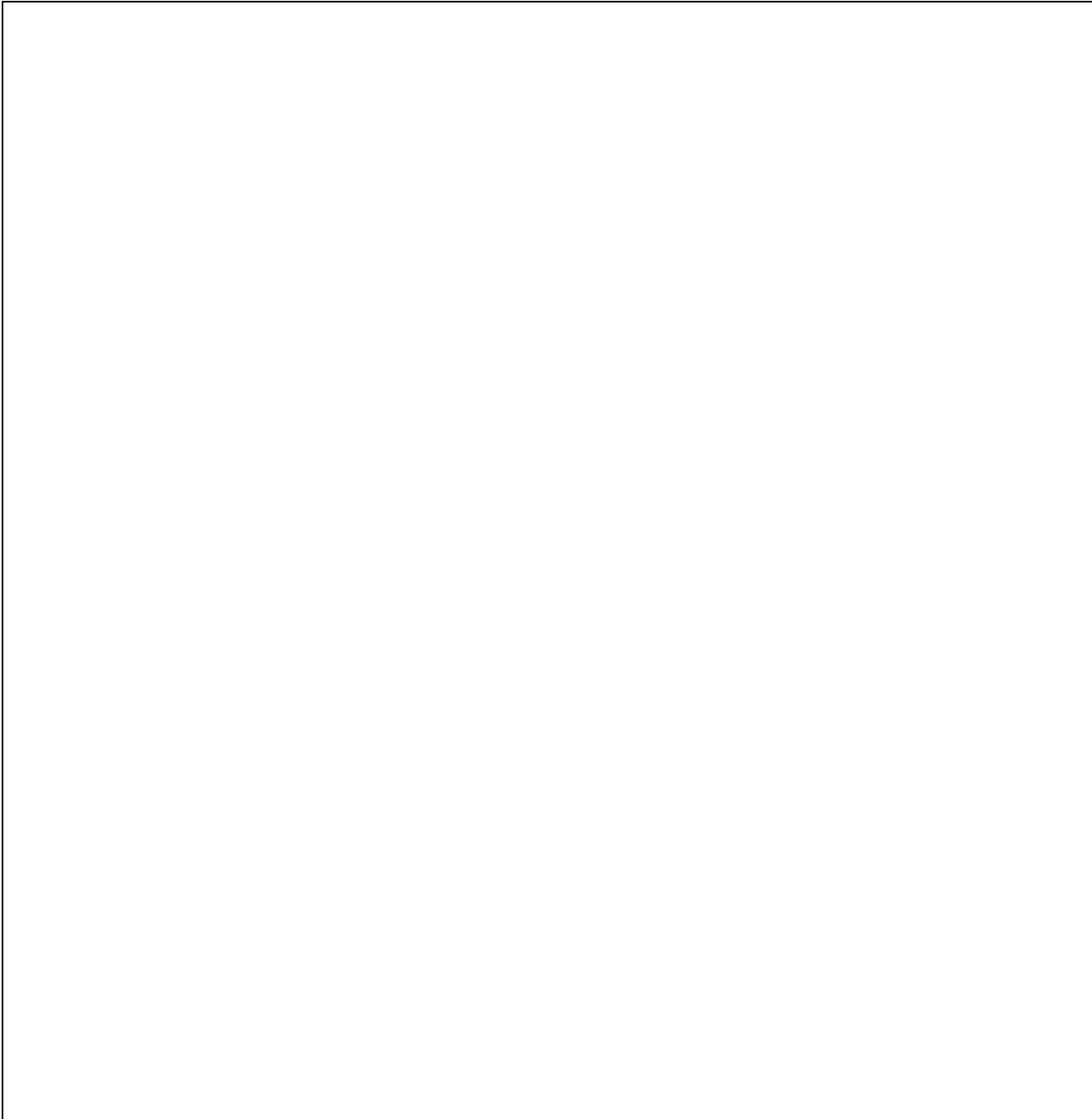
\_\_\_\_\_

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**Any decision by the zoning officer may be appealed within thirty (30) days hereof to the Zoning Hearing Board.**

**The zoning officer can provide further information.**

**Indicate North**



Directions: Draw map of property including all existing and proposed structures. Indicate north by arrow.

Include: 1. Property dimensions 2. Distance from structures to all property lines 3. Street names 4. If new accessory structure, distance to existing structures.

Sugarloaf Township is not responsible for any dimensions shown on sketch. The establishment of property lines is the responsibility of the owner or agent thereof.

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

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**DATE**

Under Section 603.2 of the Sugarloaf Township Zoning Ordinance, if an application is made by any person other than the owner or lessee, it must be accompanied by a written authorization from the owner or lessee authorizing the work and designating the agent to act in their place.

Signatures of all persons listed on the Deed are required:

Please Sign:

---

---

---