

# NESCOPECK TOWNSHIP ZONING APPLICATION

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

Application for: New Structure \_\_\_\_\_ Alteration \_\_\_\_\_ Fence \_\_\_\_\_ Occupancy \_\_\_\_\_ Accessory Structure \_\_\_\_\_ Pool \_\_\_\_\_ Mobile Home \_\_\_\_\_

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

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

Owner Name: \_\_\_\_\_ Phone # \_\_\_\_\_

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

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

Cost: \$ \_\_\_\_\_ (Attach estimate/Quote).

Contractor Name: \_\_\_\_\_ Phone # \_\_\_\_\_

Address: \_\_\_\_\_ PA HIC Registration # \_\_\_\_\_

Lot Size: \_\_\_\_\_ Lot Width: \_\_\_\_\_ (Feet) Lot Depth: \_\_\_\_\_ (Feet)

Proposed structure size: Width \_\_\_\_\_ Ft Depth \_\_\_\_\_ Ft Height \_\_\_\_\_ Ft Area \_\_\_\_\_ sq/ft

Water Supply: On-Lot \_\_\_\_\_ Municipal \_\_\_\_\_ Sewer: On-Lot \_\_\_\_\_ Municipal \_\_\_\_\_

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 Nescopeck 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.

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.**

### OFFICE USE ONLY

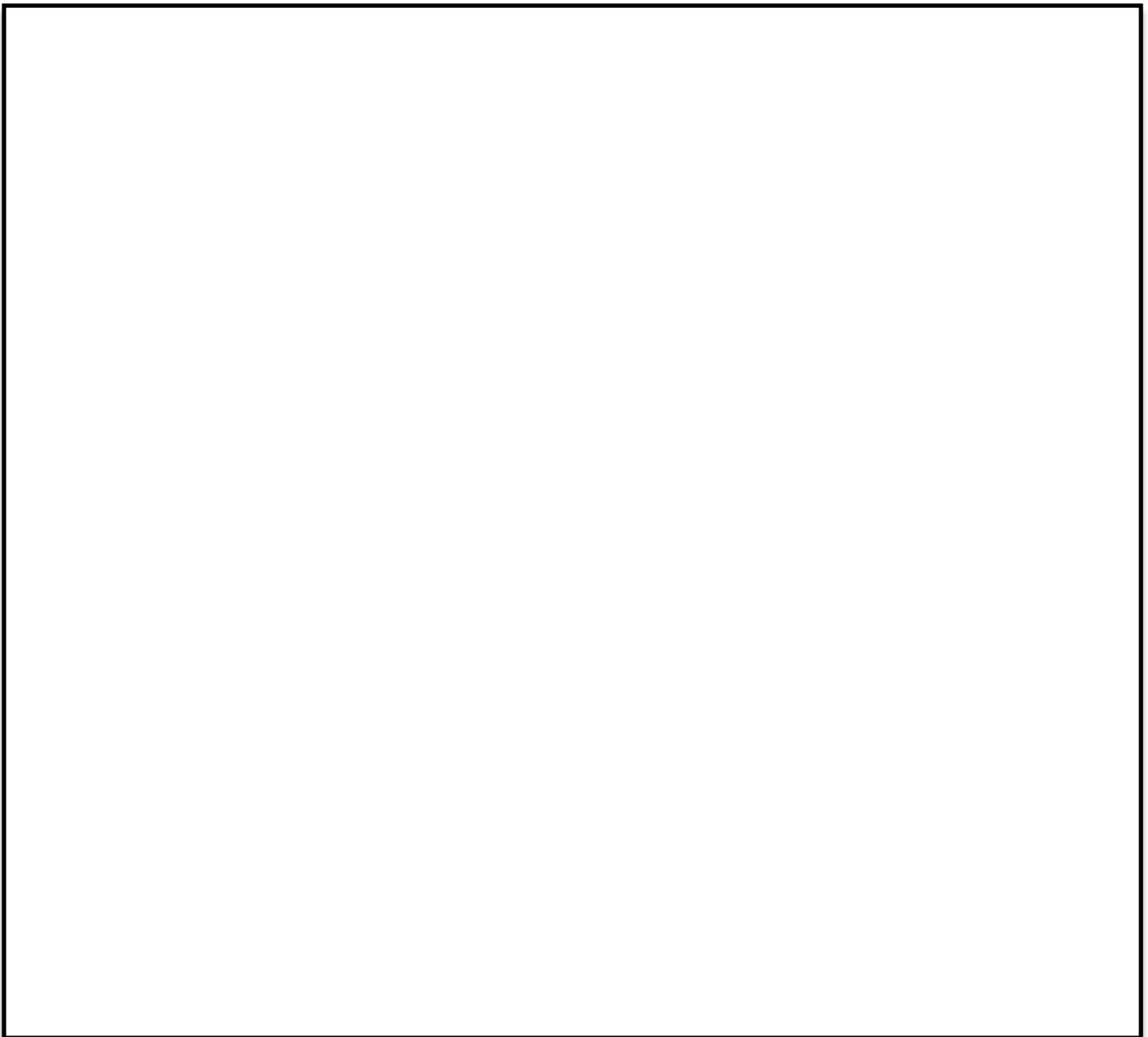
Zoning Fee: \$ \_\_\_\_\_

UCC Fee \$ \_\_\_\_\_

Occ. Fee \$ \_\_\_\_\_

Admin. Fee \$ \_\_\_\_\_

**TOTAL FEE: \$ \_\_\_\_\_**



#### **ZONING SETBACKS**

Nescopeck Township strongly recommends that the applicant verify the accuracy of the of the correct location of this structure in regards to the zoning setback requirements applicable to this lot. Accuracy of building setbacks is the sole responsibility of the applicant and the applicant accepts all risks associated with any inaccurate information contained in the review process provided by the applicant.

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

Include: Property dimensions, distances from all structures to all property lines, street names, distance to existing structures, any easements and right of ways.

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

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**Signature of Applicant**

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**DATE**

Signatures of the Deed Owner is required:

Please Sign:

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