Borough of Highspire

640 ESHELMAN STREET HIGHSPIRE, PA 17034 Office (717) 939-3303 - Fax (717) 939-3371

APPLICATION FOR ZONING PERMIT

IMPORTANT - Applicant to complete all items in Sections: I, II, III, & IV

I. PROPERTY INFORMATION - Use additional sheets and/or documentation as necessary.						
1. Property Location: (Number Street City State Zip)						
2. Tax Parcel Number: 3.Zoning District:						
4. Current Assembly Business Education Factory Industrial Use of High Hazard Institutional Mercantile Storage Property Residential Type: Utility & Accessory						
5. If Vacant, Most Recent Use of Property:						
6. Date Property Vacated (if known):						
 7. Current Use Permitted By: By Right Special Exception Conditional Use Prior Variance - Authorizing Ordinance Section: Date Granted: 						
8. Date of Purchase by Current Owner: Month , Date, Year						
9. Is the Property Owner Occupied Rental Property						
10. Identify Lot Dimensions: (Width x Depth in Feet)						
Is the property in a flood plain area?						
11. Identify Existing Improvements on Lot: (structures, etc.)						
12. Identify Existing Signs on Lot:						

II. PROPOSED PROJECT INFORMATION						
1. Proposed Use of Property:						
Assembly	Business	Education	Factory Industrial			
	Institutional		Storage			
Residential Type:			□ Utility & Accessory			
2. Proposed Use Perm						
, ,	Prior Variance Special Exception					
Conditional Use	Authorizing Ordinance	e Section:				
III. PROPOSED WORK	III. PROPOSED WORK - Describe in detail the proposed project. Use additional sheets and/or documentation as necessary.					

IV. IDENTIFICATION - To Be Completed By All Applicants.						
Name (Number		Mailing Address , Street, City, State, and Zip)	Telephone No.	Fax No.		
Owner or Lessee						
Builder						
Architect and/or Engineer						
I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.						
Signature of Applicant		Address		Application Date		
Contractors Building License Number:						
Other Info	ormation:					

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

V. VALIDATION				
1. Zoning Permit Number:				
2. Date Zoning Permit Issued:				
3. Date Zoning Permit Expires:				
4. Zoning Permit Fee \$				
5. Flood Hazard Area:				
6. Approved by:				
ZONING OFFICER	DATE			
VI. ZONING PLAN EXAMINERS NOTES				
DISTRICT:				
USE:				
FRONT YARD:				
SIDE YARD:	SIDE YARD:			
REAR YARD:				
NOTES:				

NORTH

STREET

- 1. Dimensions of lot size and shape.
- 2. Existing Building drawn with solid lines and proposed construction with dotted lines.
- 3. Dimensions of all building area, roofed areas, and all accessory buildings.
- 4. Dimensions of all paved areas, i.e. private sidewalks, driveways, steps, slabs, and other impervious surfaces.
- 5. Notation if property is a corner lot.
- 6. Exact location for all fences and distance from property line, and a description of the type of material to be used along with the height of the proposed fence.
- 7. Plot plan must be drawn to scale, i.e. 1" = 20'.