

South Londonderry Township Application for Zoning Approval

Date Received: _____

Permit # _____

PROPERTY OWNER(S):	DAYTIME CONTACT PHONE#:
PROPERTY OWNER MAILING ADDRESS:	

PROPERTY INFORMATION:

PROPERTY LOCATION:		TAX IDENTIFICATION #:	
SUBDIVISION:		PHASE:	LOT#:
Does this property have any easements? <i>(ex: drainage, sewage, utility, etc.)</i>	Does this property have any deed restrictions? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, please give description of restriction.	

PROPOSED IMPROVEMENT INFORMATION

DESCRIPTION OF IMPROVEMENT:				PROPOSED USE:	
Length:	Width:	Height:	Total Sq. Ft.:	Cost of Improvement: \$	

PLEASE COMPLETE THE ATTCHED PLOT PLAN IN FULL DETAIL, INCLUDING ALL EXISTING STRUCTURES, EASEMENTS, AND THE LOCATION OF THE PROPOSED STRUCTURE AND ITS DISTANCE FROM ALL LOT LINES. No STRUCTURES CAN BE PLACED IN AN EASEMENT.

I hereby acknowledge and certify that I am the owner in fee or the authorized agent of the owner in fee of the property upon which the work authorized by the permit sought will be performed. I further certify that all work will be performed in accordance with all applicable laws and regulations of the United States of America, the Commonwealth of Pennsylvania and South Londonderry Township.

Applicant Signature

Date

Office Use Only

Approved Denied

Special Comments/Restrictions:			
Payment Information: Amount Due:	Amount Paid	Payment Method	Date Received
\$	\$	<input type="checkbox"/> Cash <input type="checkbox"/> Check/MO _____ <input type="checkbox"/> Credit/Debit Card	

DETAILED SITE PLAN

Zoning Permit # _____

ZONE: _____ STRUCTURE TYPE: _____

LOT SQ FT _____ FRONTAGE _____ %COVERAGE _____

SETBACK REQUIREMENTS:

FRONT: _____ SIDES: _____ REAR: _____

****ALL PLOT PLANS MUST CLEARLY MARK ALL EXISTING STRUCTURES, EASEMENTS, ETC. ON THE PROPERTY AND DESIGNATE THE LOCATION OF THE PROPOSED STRUCTURE AND IT'S DISTANCE FROM ALL LOT LINES.**

