## LYCOMING COUNTY ZONING 570-320-2130



## 48 WEST THIRD STREET WILLIAMSPORT PA 17701

#### ZONING PERMIT APPLICATION INSTRUCTIONS

1) Name of Applicant: Print your name (first, MI, last). 2) Phone

2) Phone Number: Enter your phone number.

3) Complete Mailing Address: Print your complete mailing address.

City 5) State

6) Zip Code

7) Name of Lot Owner: If same as applicant, enter "Same"; otherwise, list name.

8) Address: If same as applicant, enter "Same"; otherwise, list name.

9) Previous Lot Owner: Only if you have owned the property less than 12 months.

10) Builder/Contractor for Project: Name of the builder for this project.

11) Type of Work: New Structure - house, mobile home, seasonal home, duplex, etc.

<u>Addition</u> – living area such as a bedroom, family room, sunroom, etc.

Accessory Structure - shed, garage, swimming pool, patio, barn, etc.

*Change in Use* – i.e. domestic garage to commercial use (vehicle repairs)

Sign – advertise business, etc.

Home Business/Occupation - i.e. CPA, notary, beauty salon, etc.

Other – any project that does not fit into any of the above categories

12) Premises Located at: Enter the physical address (road name and #); not the mailing address.

13) Township: Enter Township or Borough name where the property is located.

14) <u>Use of proposed building, structure, or addition</u>: What will it be used for? Example: shed (storage of tools, lawn equipment), addition (family room, kitchen), barn (storage of hay, feed), etc.

15) Size of Lot: Enter the width and depth in feet or number of acres.

16) <u>Dimensions of Proposed Building, Structure or Addition</u>: Enter the width, depth, height and total square footage.

17) Setbacks from Property Line to Building or Structure:

Front: From the property line or road right-of-way to the front of the building or structure

Side and/or Front: From the side property line to the side of the building or structure. (Corner properties will have two front yards)

**Rear**: From the rear property line to the rear of the building or structure

<u>Side</u>: From the opposite side property line to the side of the building or structure

18) <u>Plot Plan Showing Location on Property is Attached</u>: Either attach a copy of the plot plan or draw plot plan to include with the application showing the building in relation to the property lines.

19) Character of Construction: Indicate type of building materials being used.

20) Approximate Cost of Work: Must have an approximate cost of project.

21) Attach Copy of: Stormwater Plan / Sewage Permit

22) Construction Start Date: Enter the date you plan to start the project.

23) Completion Date: Enter date you plan to complete the project. (Maximum time is one year.)

24) Sign Your Name: 25) Print Your Name on Line Below Your Signature: 26) Date of Application: Submission date

#### SAMPLE ZONING APPLICATION PLOT PLAN SKETCH

**SKETCHES DO NOT HAVE TO BE DRAWN TO EXACT SCALE** but must contain the following information, be drawn proportionately and show accurate measurements: North Arrow, all abutting streets and alleys with names, dimension of lot or lots, all existing buildings on lots, all existing utility lines and easements if known, proposed buildings or improvements, and distances from all property lines to existing or proposed buildings or improvements. Clearly indicate property owner/ applicant's name, property address, and date of sketch.

Crosshatch all existing buildings. LABEL all property lines. ("?" below indicates a measurement is required.) Indicate North in the circle. **SCALE** (if drawn to scale) \_\_\_\_\_ Lot line Rear Setback? ft. Side lot Line ? ft. Proposed New Construction **Existing Building** Side Setback Side Setback ? ft. ? ft. Front Setback? ft. Address and Street Name

### ZONING/DEVELOPMENT PERMIT APPLICATION

This application is made for a zoning/development permit to erect or alter a structure as shown on the attached diagram or to use the property for the purpose described. The information which follows, with the location diagram, is made part of this application by the undersigned. It is understood and agreed by the applicant that any error, misstatement, or misrepresentation of material facet, either with or without intention, may cause a refusal of this application. Any change in the location, size, or use of structure or land after the issuance of this permit, without the approval of the Zoning Administrator or the Zoning Hearing Board shall be grounds for the revocation of this permit. The applicant agrees to allow the Zoning Administrator or duly appointed assistant to examine all structures and land for which an application for a Zoning/Development Permit has been requested. Please see that other permits (including building, subdivision, land development, highway occupancy, sewage planning, floodplain management, etc.) are in place before proceeding. All construction must be completed before the expiration date of this permit. This permit is valid for one (1) calendar year from date of issuance.

| Permit No.:  LEAVE THIS AREA BLANK  Zoning District:  Tax Parcel No.:  |  |                          |  |  |  |  |  |  |  |  |
|--|--|--------------------------|--|--|--|--|--|--|--|--|
|  |  |                          | 2) Phone #:                                |  |  |  |  |  |  |  |
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|  |  |                          | 13) Mullicipality.                         |  |  |  |  |  |  |  |
|  |  |                          |  |  |  |  |  |  |  |  |
| ft.  | Depth  | ft.                      | Area ft²/ acres                            |  |  |  |  |  |  |  |
| ft. Dept   | h ft.  | Height                   | ft./ stories                               |  |  |  |  |  |  |  |
| ft. Side and/  | or Front   | _ ft. Side               | ft. Rear ft                                |  |  |  |  |  |  |  |
| y is attached: Yes   | No 🔲   |                          |  |  |  |  |  |  |  |  |
| brick, steel, etc.)  |  | 20                       | Approximate Cost of Work: \$               |  |  |  |  |  |  |  |
| Yes No   | Sev  | vage Permit: Yes         | □ No □                                     |  |  |  |  |  |  |  |
|  | 23) Com  | pletion Date (max        | x time one year):                          |  |  |  |  |  |  |  |
|  |  |                          |  |  |  |  |  |  |  |  |
| 25) P  | Print Name:  |                          | 26) Date:                                  |  |  |  |  |  |  |  |
| ODES (Check appropria orming  Sign  Sign  Ilood Plain Regulations Other  Permit Offic Oved  Permit Offic Odenied   | ate spaces)  Temporary   Other   er                              | Notes Date               | Permit No<br>of Issuance                   |  |  |  |  |  |  |  |
| of Contract of Con | Zoning District:    John   Sign   Accessore, etc.)   Ft.   Dept. | Zoning District:    Fuse | Zoning District:  Tax Parcel No.  5) State |  |  |  |  |  |  |  |

# SAMPLE ZONING APPLICATION PLOT PLAN SKETCH

**SKETCHES DO NOT HAVE TO BE DRAWN TO EXACT SCALE** but must contain the following information, be drawn proportionately and show accurate measurements: North Arrow, all abutting streets and alleys with names, dimension of lot or lots, all existing buildings on lots, all existing utility lines and easements if known, proposed buildings or improvements, and distances from all property lines to existing or proposed buildings or improvements. Clearly indicate property owner/ applicant's name, property address, and date of sketch.

| Crosshatch all existing buildings. Indicate North in the circle. |   |   |   |              |   |   |    |   |   |   | LABEL all property lines. ("?" below indicates a measurement is require  SCALE (if drawn to scale) |   |   |   |   |   |   |        |   |   |    |   |   |   | uirea |        |   |   |   |
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