

TOWNSHIP OF WESTFALL, PA
Zoning Application
 As required by Township Zoning Ordinances

NOTICE
 This permit is void within six months of date of issue unless work has started.

Application is hereby made for a permit to erect or alter a structure which shall be located as shown on the attached diagram and/or to use the premises for the purposes described herewith. The information which follows, together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without approval of the Zoning Officer and building inspector shall constitute sufficient ground for the revocation of this permit.

Issuance of this permit authorizes the code enforcement officers of the Township access to the Project/Site during the hours of 7:00 am to 7:00 pm.

Permit No. _____ Issued _____ 20____ Fee _____

PROJECT SITE INFORMATION:
 911 Address _____
 Tax Parcel No. _____ Use/Structure is Located in _____ Zoning District
 Owner's Name: _____
 Owner's Address: _____
 Present Use of Land or Structure: _____
 Present Use is: Conforming Non Conforming
 Present Structure is: Conforming Non Conforming N/A
 Present Lot is: Conforming Non Conforming

Type of Proposed Use/Structure: Commercial Residential
 Proposed Use, Residential: Number of Families: _____
 New structure { Dwelling Pool Shed Fence
 Addition/Enlargement { Deck Porch Garage Other
 Change of Use From _____ To _____
 Home Occupation Yard Sale (Dates) _____
 Proposed Use, Commercial:
 New Structure Describe Use: _____
 Addition/Enlargement
 Change of Use From _____ To _____
 Expansion of Use Added Use (s) _____
 Other _____

SITE INFORMATION:
 Lot Size: _____ Square Feet Structure Footprint: _____ Square Feet
 Impervious Surface coverage of Lot (Include All Structures and All areas surface w/Impervious materials). _____
 Square Feet
 % Building coverage _____% (Include all Structures on Parcel)
 % Impervious coverage _____% (Include all Structures & other areas surfaced w/Impervious materials).
 Total Height of Structure _____ Feet
 For Residential Uses: Number of Bedrooms: Previous _____ New _____
 Heated Habitable Floor Area _____ Sq. Ft. Bldg. Width _____ Ft. Bldg. Length _____ Ft.
 Sewage Permit No. _____ If new System is being installed (Attach a copy of Sewage Permit)
 Type Sewage System: On Lot System Community System Type Water Service: On Lot Well Community Well
 Attach a sketch Plan showing all of the Following:

- Property Lines & Dimensions
- Locations of All existing and proposed structures
- Location of any Lake, Stream or Body of Water
- The distance from Each Structure to
 - Any other structure
 - All Property Lines
 - Any Body of Water
- The Location of any Flood Zone on the Property

Name of Applicant: _____ Phone: _____
 Address of Applicant: _____
 If Applicant is not owner, attach owner's authorization for work.
 Applicant's Signature _____
 Date of Application _____ 20____

(For Zoning Officer's Use)
 Approval and Dates of Action Taken:
 1. Application Approved Yes No (Date) _____
 2. Reason for Denial of Application _____ (Signature of Zoning Officer) _____
 3. Applied for Conditional Use (Date) _____ Appeal _____ Yes No
 Special Use Application _____ Yes No
 4. Board's Decision: Granted Denied (Date) _____ ORDER: _____
 5. Applied for Variance (Date) _____ Hearing (Date) _____
 6. Board's Decision: Granted Denied Board Findings Dated _____
 7. Application Approved Subsequent to Variance Decision Yes (Date) _____ No (Date) _____
 8. Building or use completed (Date) _____ (Signature of Zoning Officer) _____
 9. Permit Revoked (Date) _____ C.U. Issued (Date) _____ C.U. # _____