

Permit NO.: _____

ZONING PERMIT APPLICATION

ARENDSVILLE BOROUGH AND BUTLER TOWNSHIP ZONING ORDINANCE

TO BE FILLED IN BY APPLICANT:

Application is hereby made for a permit in compliance with the Arendtsville Borough and Butler Township Zoning Ordinance. Applicant hereby certifies that the plot plans submitted with this application are correct and no changes will be made without submitting a written plan for such changes. Application shall be considered as complete when the zoning permit fee has been paid and the application is signed by the applicant.

- 1. Property Owner(s): _____
- 2. Owner(s) Address: _____
- 3. Applicant: _____
- 4. Applicant Address: _____

- 5. Location of Property: _____
- 6. Area of Lot/Parcel: _____ Sq. Ft. or Acres: _____
- 7. Describe Present Uses/Structures: _____
- 8. Public Sewer: YES / NO Public Water? YES / NO Corner Lot: YES/NO
- 9. Off-Street Parking Spaces: Present _____ Proposed _____

- 10. Nature of Proposed Project: _____
 - _____ Erect a New Structure(s) _____
 - _____ Replace a Structure(s) _____
 - _____ Add to a Structure(s) _____
 - _____ Erect/Replace a Sign _____
 - _____ Change of Land Use _____
 - _____ Home Occupation _____
 - _____ Other (Specify Below) _____

11. Describe Proposed Use(s): _____

12. Height of Proposed Building: _____

13. Has Sewage Permit been Obtained: YES / NO / (N/A)

14. Road Encroachment Permit: _____ Municipal _____ State

Applicants are advised that a highway occupancy permit is required from PennDOT prior to drive access to state highway.

15. Size of Sign(s) (if applicable): _____ x _____ x _____ ht.,
_____ x _____ x _____ ht.,

16. Signature of Applicant _____ Date _____

TO BE FILLED IN BY ZONING OFFICER:

The following shall be the minimum requirements for the proposed project(s) as set forth in the Arendtsville Borough and Butler Township Zoning Ordinance.

1. Plot Plan Submitted? YES / NO / NOT REQUIRED

2. Zoning District: _____

3. Setback Information:

Required:	Proposed:	
	Structure A	Structure B

_____	Front	_____	_____	feet from right-of-way
_____	Rear	_____	_____	feet
_____	Side	_____	_____	feet
	or	_____	feet on one side with a combined total of feet for both sides	

4. Minimum Loading Space _____ Loading Space Provided _____

5. Maximum Sign Area _____ Proposed Sign Area _____

6. Maximum Lot Coverage _____ Proposed Lot Coverage _____

7. Remarks:

8. Fee: \$ _____ Date Paid _____

Cash _____ Check Number _____

CERTIFICATION

1. The proposal DOES/DOES NOT comply with the Arendtsville Borough and Butler Township Zoning Ordinance.

2. A variance is required YES / NO.

3. A Special Exception is required YES / NO.

4. A permit for the above described project/use was GRANTED/REFUSED on this _____ day of _____, 20__.

5. This permit expires on the _____ day of _____, 20__.

6. If applicable, the following conditions were placed on a special exception permit by the Arendtsville Borough Zoning Hearing Board or the Butler Township Zoning Hearing Board:

- a.
- b.
- c.
- d.

7. Signature of Zoning Officer _____ Date: _____