

APPLICATION FOR ZONING/BUILDING PERMIT

NOTICE: This permit is void if building construction is not started within six (6) months and not completed within two (2) years of date of issuance.

Lower Saucon Township
Zoning Office
3700 Old Philadelphia Pike
Bethlehem, PA 18015
Phone (610) 865-3291

For Official Use Only
TAX MAP _____
BLOCK _____
LOT _____
ZONING DISTRICT _____

PROPERTY INFORMATION

PROPERTY ADDRESS: _____
 SUBDIVISION NAME: _____ LOT NO.: _____
 PROPERTY OWNER NAME: _____ PHONE: _____
 MAILING ADDRESS: _____
 CONTRACTOR: _____ PHONE: _____
 ADDRESS: _____

RESIDENTIAL	NONRESIDENTIAL
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- NEW BUILDING – One Family
- NEW BUILDING – Two Family
- ADDITION
- INTERIOR ALTERATION
- EXTERIOR ALTERATION
- PATIO/DECK
- ABOVE GROUND SWIMMING POOL w/FENCE
- IN-GROUND SWIMMING POOL w/FENCE
- FENCE
- RESIDENTIAL SHED/STORAGE
- RESIDENTIAL GARAGE/CARPORT
- SIGN
- TREE REMOVAL
- OTHER

- GENERAL COMMERCIAL
Retail _____ Service _____ Sales _____
- MULTI-FAMILY RESIDENTIAL # Units _____
- PUBLIC UTILITY
- INDUSTRIAL
- PLACE OF WORSHIP/PUBLIC ASSEMBLY
- SCHOOL/EDUCATIONAL
- GOVERNMENT
- PROFESSIONAL OFFICE/LABORATORY
- HOTEL/MOTEL/DORM
- RESTAURANT/TAKE OUT
- MOTOR VEHICLE SERVICE/SALES
- SIGN
- OTHER

BRIEF DESCRIPTION OF CONSTRUCTION:

LOT AND BUILDING DIMENSIONS AND AREAS

Lot Width _____	ft.	Building Width _____	ft.	Side Yard Rt. _____	ft.
Lot Depth _____	ft.	Building Depth _____	ft.	Side Yard Lt. _____	ft.
Lot Area _____	sf.	Building Height _____	ft.	Front Yard _____	ft.
Lot Coverage _____	%	Building Area _____	sf.	Rear Yard _____	ft.

CONSTRUCTION COST		SQUARE FOOTAGE		AMOUNT OWED (when submitted)	
BUILDING	\$ _____	BASEMENT	_____ sf.	APPLICATION FEE	\$ _____
ELECTRICAL	\$ _____	1 ST FLOOR	_____ sf.	PERMIT FEE	\$ _____
PLUMBING	\$ _____	2 ND FLOOR	_____ sf.	STATE UCC	\$ _____
HVAC	\$ _____	MISC <small>DECKS PATIOS GARAGE</small>	_____ sf.	TOTAL	\$ _____
TOTAL	\$ _____	TOTAL	_____ sf.		

APPLICANT'S STATEMENT: I hereby agree to comply with all Ordinances of Lower Saucon Township and with all the Rules and Regulations of all Departments thereof which are applicable hereto and to perform no work that is not specifically covered by this permit application. I certify that all information set forth on this application is true and correct.

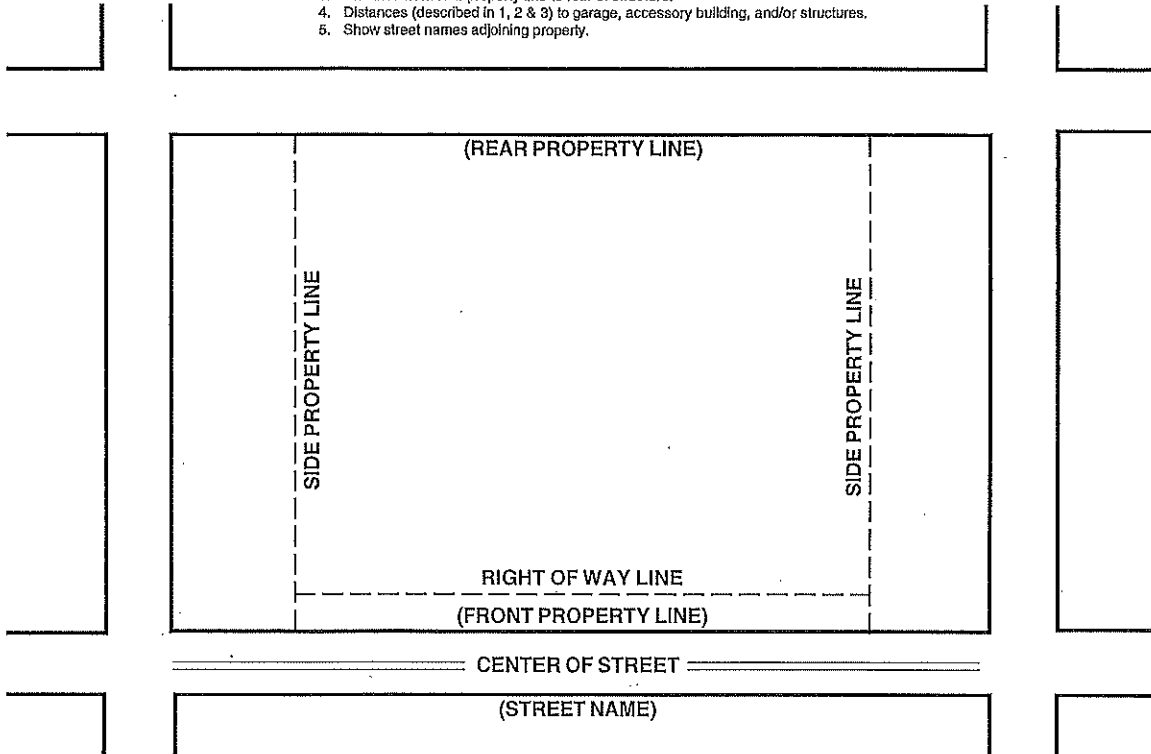
Applicant's Signature _____ Date _____

NOTE: All construction shall comply with the most recently adopted Township Building Codes. An occupancy permit will be required upon completion of any new building.

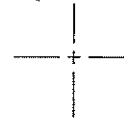
FILL IN THE PLOT PLAN ON THE BACK OF THIS FORM

The following dimensions shall be shown:

1. Distance from front property line to front of structure.
2. Distances from side property lines to nearest portions of structure thereto.
3. Distance from rear property line to rear of structure.
4. Distances (described in 1, 2 & 3) to garage, accessory building, and/or structures.
5. Show street names adjoining property.



NOTE: The Zoning Office is NOT responsible for any property dimensions shown on this sketch: establishment of property lines is the responsibility of the owner and/or his agent.



I WILL HAVE THE STRUCTURE BUILT AND LOCATED IN ACCORDANCE WITH THE DIMENSIONS SHOWN ON THE SKETCH ABOVE.

SIGNED

CLEARANCE BY TOWNSHIP OFFICES:

GRADING Permit No. _____

DRIVEWAY Permit No. _____

SEWAGE: On-site Septic Permit No. _____ Public Permit No. _____

WATER: Well Public Permit No. _____

ZONING/BUILDING PERMIT: GRANTED DENIED Date _____

Conditions/Reasons _____

Zoning Officer _____

APPLIED TO ZONING HEARING BOARD: Date _____ Hearing No. _____

BOARD'S DECISION: GRANTED DENIED Date _____

Conditions/Reasons: _____
