

ZONING PERMIT APPLICATION**ARENDTSVILLE 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. Owner(s) Phone Number: _____
4. Applicant: _____
5. Applicant Address: _____
6. Applicant Phone Number: _____
7. Applicant Email Address: _____
8. Location of Property: _____
9. Area of Lot/Parcel: _____ Sq. Ft. or Acres: _____
10. Describe Present Uses/Structures: _____
11. Public Sewer: **YES / NO** Public Water? **YES / NO** Corner Lot: **YES/NO**
12. Off-Street Parking Spaces: Present _____ Proposed _____
13. 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) _____
- _____ Add Additional Dwelling Unit (ADU)
- _____ Name and Relationship of Occupant(s): No more than 2.

ADU Note: The Applicant shall contact the Adams County Tax Services Office to obtain an address for the ADU (whether attached or detached) and the Applicant shall provide this information to the Zoning Officer prior to Zoning Permit approval.

Mailing Address of ADU:

14. Describe Proposed Use(s): _____
15. Cost of Proposed Project: _____
16. Height of Proposed Building: _____
17. Has Sewage Permit been Obtained: **YES / NO / (N/A)**
18. Road Encroachment Permit: _____ Municipal _____ State
- Applicants are advised that a highway occupancy permit is required from PennDOT prior to drive access to state highway.
19. Size of Sign(s) (if applicable): _____ x _____ ht.,
_____ x _____ ht.,
20. **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: \$ _____ Zoning – Date Paid: _____ Cash: _____ Check #: _____
 \$ _____ UCC Permit Admin Fee – Date Paid: _____ Cash: _____
 Check #: _____

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 _____, 20_____.

5. This permit **EXPIRES ON** the _____ day _____, 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:** _____