Revised: 02/12/26

# ELIZABETHTOWN BOROUGH
# PROPERTY USE PERMIT APPLICATION

## PART 1

### PERMITS

A **Use Permit** is required when any of the following conditions apply:

- A change in commercial use (e.g., converting a retail store to a restaurant)
- A change in property ownership for the business
- A change in business occupants or business tenants
- Establishment of an in-home business (including child day care)
- Establishment of a no-impact in-home business

All Use Permit applications must comply with the **zoning requirements** for the district in which the proposed use is located.

**Please note:** Additional approvals may be required in some cases, such as a **Variance**, **Conditional Use**, or **Special Exception**, which must be granted by the **Zoning Hearing Board** or **Borough Council**.

### PERMIT TYPE DESCRIPTION

### COMMERCIAL

A commercial use refers to any establishment or individual engaged in the sale of goods or the provision of services directly to consumers. This includes retail businesses and professional office settings that must comply with the Borough's Zoning Ordinance.

### RESIDENTIAL NO-IMPACT HOME-BASED BUSINESS

A no-impact home-based business is a business or commercial activity that is conducted as a secondary use within a residential dwelling. It must be clearly incidental to the primary residential use and must not generate customer, client, or patient traffic—whether by vehicle or on foot—nor involve deliveries or pickups beyond what is typical for a residential property.

To qualify as a home-based business, the following conditions must be met:

A. No customer, client, or patient traffic is permitted, whether by vehicle or on foot.
B. Pickup, delivery, or removal functions must not exceed those typical of a residential property.
C. The business must be compatible with the residential character of the property and surrounding neighborhood.
D. Only immediate family members residing in the home may be employed.
E. No retail sales or substantial inventory storage is allowed on-site.
F. There must be no visible signs of business activity, including signage, special lighting, or additional parking.
G. Equipment or processes used must not produce noise, vibration, glare, fumes, odors, or electronic interference detectable beyond the property.
H. The business must not generate solid waste or sewage beyond what is typical for residential use.
I. The business may not occupy more than 25% of the habitable floor area of the dwelling.
J. No illegal activity may be conducted.
K. The business must be operated by the property owner or their immediate family members, and the property must remain owner-occupied.

**RESIDENTIAL HOME OCCUPATION** (*Special exception approval by the* Zoning Hearing Board)

**Location of Use** - A home occupation must be conducted entirely within the principal dwelling or an accessory structure on the property.

**Number of Home Occupations** - Only one home occupation is permitted per lot.

**Employment Restrictions** - Only permanent residents of the dwelling may be employed in the home occupation, with the exception of part-time clerical assistance not exceeding 20 hours per week.

**Use of Floor Area** - No more than 25% of the total floor area of the dwelling may be used for the home occupation.

**Exterior Appearance** - There shall be no exterior display, signage (except as permitted under the sign regulations in this chapter), outdoor storage of materials, or any other visible indication of the home occupation that alters the residential character of the property. Refer to § 1705(1)(G) for additional guidance.

**Environmental Impact** - The home occupation must not produce offensive noise, vibration, smoke, particulate matter, heat, humidity or any other objectionable effects.

**Permitted Examples** - Acceptable home occupations may include, but are not limited to: Art studios, Dress making or alterations, Barbershops or beauty salons, Private instruction (e.g., music or dance) limited to one student at a time, Professional offices (e.g., dentist, physician, lawyer, engineer, planner, accountant, architect, real estate or insurance offices), or Other similar low-impact professional or creative services.

**Prohibited Uses** - The following uses are strictly prohibited as home occupations: Commercial stables, kennels or animal hospitals, Video game arcades, Retail stores, Weapons sales or repair, Restaurants or Funeral parlors.

**Expansion Limitations** - Home occupations may not be expanded within the dwelling or extended to adjacent properties.

**Parking Requirements** - Off-street parking must be provided in accordance with the requirements outlined in Part 16 of this ordinance.

**Ownership and Residency** - Home occupation uses are limited to the property owner and their immediate family members, and the property must remain owner-occupied.

**RESIDENTIAL DAY-CARE RESIDENCE**

*Fire safety inspections will be conducted by the Borough's Code Compliance Official to ensure adherence to all applicable safety standards***.**

A day-care residence may care for no more than the number of children permitted by the applicable zoning district regulations, excluding children who permanently reside in the home. The following additional requirements must also be met:

**Permitted Structures** - Day-care residences are only allowed in single-family detached, semi-detached, or attached dwellings. Lot size and layout must accommodate parking, access, and all other applicable zoning standards.

**Space Requirements** - The facility must provide a minimum of: **100 square feet** of usable outdoor play space per child, and **40 square feet** of usable indoor space per child, including space for resident children.

**Outdoor Play Restrictions** - Outdoor play is limited to the rear yard only and may occur only between the hours of **8:00 a.m. and 7:00 p.m.**

**Buffer Yard Requirements** - A buffer yard of at least **10 feet** in depth must be maintained along all rear and side property lines. This buffer is in addition to the required side and rear yard setbacks and **cannot** be counted toward the required outdoor play area.

**Licensing and Compliance** - Operators must comply with all applicable licensing and registration requirements of the **Pennsylvania Department of Public Welfare**, as well as any other relevant local, state, or federal regulations. Proof of compliance must be submitted before a permit to operate a day-care residence will be issued.

**If you have any questions, please contact the Borough's Zoning Officer or Building Code Official at (717) 367-1700 or via email at boro@etownonline.com.**

**PLEASE PRINT ALL INFORMATION CLEARLY**
**INCOMPLETE APPLICATIONS WILL BE RETURNED**

## PART 2
### PROJECT INFORMATION

Location (Street Address): _____

Property Owner: _____

Owner's Address _____

Owner's Phone Number_____

Owner's Email: _____

**APPLICANT'S INFORMATION** Is the property owner the applicant? ☐ YES ☐ NO

Applicant's Name: _____

Applicant's Address: _____

Applicant's Phone Number: _____

Applicant's Email: _____

**BUSINESS TENANT'S INFORMATION** *(Please complete the Business Emergency Contact Listing)*

Business Tenant's Name: _____

Business Tenant's Home Address: _____

Business Tenant's Phone Number: Home: _____ Work: _____ Cell: _____

Business Tenant's Email: _____

**PERMIT TYPE**

*"In-home businesses and day care businesses must include in the description below the requirements listed on page 3 for Residential Home Businesses and on page 4 for Residential Day Care."*

**TYPE OF USE** *(Refer to the permit type descriptions)*

☐ Commercial * ☐ Home Occupation ☐ No-Impact Home-Based Business ☐ Day Care

*Commercial permit applicants must complete the Emergency contact list on page 6

Will you be adding a sign? ☐ YES ☐ NO

**Detailed Explanation of the Intended Use of the Property** *(Home Occupation and Day Care businesses must include, in the description below, the requirements listed on page 2 for Residential Home Occupation and page 3 for Residential Day Care.)*

## PART 3

### SIGNATURE AND ACKNOWLEDGMENT

By signing below, I certify that the information described in this application and any attachments will be completed and the property used as stated. I will not build, construct, erect, plant, assemble, or store any structure or materials within an easement.

I authorize designated Borough officials and their inspectors to enter the property to investigate, inspect, and examine the use and structures described in this application to verify compliance with the Borough's Zoning Ordinance, and if applicable, the Unifor Construction Code for the accuracy of the information provided.

I understand that no construction or change in the means of egress is not permitted with this permit. Additional permits are required. By signing this application, I certify that all statements and supporting documentation are true and correct, and I acknowledge that this application is made to induce official action by the Borough. I understand that false statements may subject me to the penalties of 18 Pa. C.S. §4904 (unsworn falsification to authorities).

I acknowledge that issuance of a Borough USE Permit is based on the representations in this application and that the Borough may revoke any permit if the use or structure violates applicable Borough, County, State, or Federal laws or regulations, or if the permit was issued in error or based on misrepresentations.

Nothing in this application relieves me of the obligation to comply with the Zoning Ordinance or other Borough ordinances, nor does it prevent the Borough from enforcing those ordinances. I acknowledge that additional permits or certificates of use and occupancy may be required under the Zoning Ordinance and that it is my responsibility to obtain all required approvals before the structure authorized by this Construction Code Permit may be occupied.

_____ _____

**Signature of Owner, Applicant, or Authorized Agent** **Print name clearly**

_____

**Date**

Revised: 01/07/26

# ELIZABETHTOWN POLICE DEPARTMENT
# BUSINESS EMERGENCY CONTACT LISTING

Business/Organization Name: _____

Street Address: _____ | Mailing Address: _____

Elizabethtown, PA 17022 | City: _____ PA, Zip: _____

Business Phone: (  ) _____ | Type of Business: _____

Business E-mail: _____

## PERSONS TO CONTACT IN CASE OF EMERGENCY

#1 Name: _____ Phone # _____ Cell # _____

#2 Name: _____ Phone # _____ Cell # _____

#3 Name: _____ Phone # _____ Cell # _____

#4 Name: _____ Phone # _____ Cell # _____

- Alarm systems (circle one): YES NO If yes, (circle all that apply): Silent Audible

- Type of alarm(s) (circle all that apply): Burglar Fire Hold-up Panic Motion Other: _____

- Name of alarm company: _____

- 24 Hour telephone number for the alarm company: _____

- Recorded surveillance cameras (circle one) **YES NO**

  If yes, (circle all that apply): Inside Outside Drive-thru Other_____

  Storage format, (circle one): Digital VHS Other_____

  Duration of video surveillance storage/loop: _____

- Are firearms stored on site**: YES NO** If yes, (circle all that apply): Handgun Rifle Shotgun

  Is ammunition stored on site: **YES NO**

Do you have a safe? **YES NO** If yes, explain its location:_____

Hazardous materials, list type and location(s):_____

_____

Normal business hours: _____

Other special instructions: _____

Branch or corporate security contact name: _____ Phone # _____

Name of person submitting: _____ Date: _____

~~~~~~~~~~~~~~~~ **FOR POLICE USE ONLY** ~~~~~~~~~~~~~~~~

1. VA Entry Review (Date/Initials) _____/_____ Faxed to LCWC (Date/Initials): _____/_____

2. VA Entry Review (Date/Initials) _____/_____ Faxed to LCWC (Date/Initials): _____/_____

3. VA Entry Review (Date/Initials) _____/_____ Faxed to LCWC (Date/Initials): _____/_____

4. VA Entry Review (Date/Initials) _____/_____ Faxed to LCWC (Date/Initials): _____/_____

RETURN THIS FORM TO: Elizabethtown Police Department
600 South Hanover Street, Elizabethtown, PA 17022
Phone (717) 367-6540 Fax (717) 367-2332
Email etownpd@etownpolice.org
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