CITY OF HAZLETON

40 North Church Street
Hazleton, Pennsylvania
570) 459-4925

CODE ENFORCEMENT OFFICE USE ONLY
Appl. #: ZA/_____
Date Issued: _____
By: _____
Date Returned: _____
Status: _____

FEES:
- Comm. / Ind. Use **$ 125.00**
- Residential Use **$ 75.00**

ZONING PERMIT APPLICATION

[A Zoning Permit Application must be filed prior to the Building Permit Application]

This application is being made for a permit to use land or a structure, or construct, alter, or demolish a structure in the location shown on the attached sketch plan. The information and the sketch plan that follow are considered part of this application. Any application which does not contain complete information, or all required documents will be returned to the applicant as incomplete and the applicant will be directed to provide the specific additional information needed for review. ***Pursuant to* Zoning Ordinance, 2021-9, Chapter 11, section 1103 C., *the Hazleton City Zoning Officer has thirty (30) days to review and make a decision on your zoning application.*** *Any information, data or documents set forth in the application which are not true and correct, or which contain false, improper, or erroneous information, data, or documents, may result in revocation of any previously issued Zoning Permit or Approval.*

SECTION 1. PROPERTY LOCATION AND OWNERSHIP INFORMATION:

A. Property Address and Location: _____

_____

B. Deed Owner and Address: _____

_____

- Contact Number: ( ) _____ - _____

SECTION 2. APPLICANT INFORMATION, IF DIFFERENT THAN OWNER:

A. Applicant's Name and Address: _____

_____

- Contact Number: ( ) _____ - _____

B. Interest in Property:

☐ Record Owner ☐ Buyer Under Agreement of Sale ☐ Tenant with lease ☐ Other _____ ☐ Option Holder

C. Rental Property ___ yes ___ no
Current number of units_____ Proposed number of units
Rental registration up to date _____Yes _____No

D. Drivers license Attached _____ yes _____ no

SECTION 3. CONTRACTOR INFORMATION, IF SOMEONE OTHER THAN OWNER IS DOING THE WORK:

A. Contractor's Name and Address: _____

_____

• Contact Number: ( ) _____ - _____

B. Insurance Information:

☐ Proof of worker's compensation insurance is attached. ☐ Notarized affidavit verifying no employees is attached.
☐ Proof of general liability insurance is attached.

C. Pennsylvania Contractor Registration No. _____

SECTION 4. PRESENT USE OF PROPERTY:

A. Type of Use:

☐ Vacant Land
☐ Single-Family Dwelling
☐ Two-Family Dwelling
☐ Multi-family Dwelling
☐ Commercial
☐ Industrial
☐ Other _____ __
_____

B. Size and Type of Existing Lot:

Width: _____ Length/Frontage: _____ Acres/Square Feet: _____

Corner Lot: Yes _____ No _____

C. Number of Existing Buildings and Structures on Lot: _____

SECTION 5. PROPOSED WORK:

A. Type of Work, Structure and Use (check those applicable):

Type of Work	**Type of Structure**	**Type of Use**
☐ **New**	☐ **Single-family Dwelling**	☐ **Residential**
☐ **Addition**	☐ **Two-family Dwelling**	☐ **Commercial**
☐ **Repair/Alteration/Change**	☐ **Multi-family Dwelling**	☐ **Industrial**
☐ **Demolition**	☐ **Manufactured Home**	☐ **Agricultural**
☐ **Other** _____	☐ **Accessory Structure** ☐ **Fence** ☐ **Sign** ☐ **Shed** ☐ **Swimming Pool** ☐ **Garage** ☐ **Other** _____	☐ **Other** _____
	☐ **Non-residential Building**	
	☐ **Other** _____	

B. Describe the type of **work/structure/use** in detail:_____

SKETCH PLAN

Indicate North

I will have the structure built and located in accordance with the dimensions indicated above.

Date: _____

_____

Signature of Applicant

D. Zoning Information. Please complete the following (if not applicable indicate with n/a):

	Current	Proposed
Zoning District		
Lot Size (sq. ft.)		
Lot Width (ft.)		
Lot Depth (ft.)		
Building Setback: (ft.) *Front Yard (Street Name)* **(Corner Lot) Other Front Yard* *Rear Yard* *Side Yard (left side from front)* *Side Yard (right side from front)*		
Building Height (ft.)		
Number of off-street parking spaces		
Lot Coverage (%)		

E. Use Information. Check whichever is applicable:

☐ Use of structure that has been altered, enlarged or moved ☐ Use of vacant land ☐ Change in use of land

☐ Change in use of building or structure ☐ No change in use of property

Please explain: _____

Size of lot area to be used: _____ (sq. ft.)

SECTION 6. DOWNTOWN OVERLAY DISTRICT:

A. Is the property located within the Downtown Overlay District (see map located in code office). The district boundary encompasses both sides of Broad Street between Locust and Poplar Streets, both sides of Church Street between Broad and Maple Streets, both sides of Laurel Street between Broad and Maple Streets; and both sides of Wyoming Street between Broad and Holly Streets.
☐ Yes
☐ No

B. Will the proposed scope of work impact the front exterior of the building. ☐ Yes

☐ No

If you answered yes to both A. and B., you must obtain a Certificate of Appropriateness (COA) and include it with your application.

SECTION 7. OTHER CONSTRUCTION INFORMATION:

A. Has a sewer and water connection permit been obtained?

☐ Yes
☐ No
☐ Not applicable-existing connection

If a permit has been obtained, attach a copy to this application.

B. Start Date: _____ Completion Date: _____

C. Construction Costs: $_____

By signing below, the applicant and owner verify that the information contained in this application and the documents attached are true and correct to the best of his/her/their knowledge, information and belief. The applicant and owner understand that false statements made herein are subject to penalties of 18 Pa. C.S.A. Section 4904 relating to unsworn falsification to authorities. If the application is not signed by the owner, the applicant certifies that the applicant is authorized by the owner to make this application and the applicant agreed to inform the owner of the approval (with conditions if any) or denial of the application.

_____ _____
SIGNATURE OF OWNER DATE

_____ _____
SIGNATURE OF APPLICANT DATE

OFFICIAL USE ONLY

****

Date Received: _____ Fee Paid: _____

APPROVED_____ DENIED____ THIS_____ DAY OF_____ 20_____.

IF APPROVED, THE APPROVAL IS SUBJECT TO THE FOLLOWING CONDITIONS:

_____

_____

_____
ZONING OFFICER

IF THE ZONING PERMIT APPLICATION IS DENIED, A COPY OF THE DENIAL LETTER MUST BE ATTACHED.