

# APPLICATION FOR ZONING CERTIFICATE

Rev 1/09

The undersigned hereby makes application for a permit to occupy and/or use the premises or land described below. Describe the intended use or occupancy and if for business purposes give the floor area and number of employees.

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NAME OF APPLICANT: \_\_\_\_\_

ADDRESS OF APPLICANT: \_\_\_\_\_

LOCATION OF PREMISES: \_\_\_\_\_

APPLICANT PHONE NUMBER: \_\_\_\_\_

MAP#: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE IN WHOSE NAME: \_\_\_\_\_

PHONE NUMBER OF TITLE HOLDER: (     ) \_\_\_\_\_

DESCRIPTION OF PREMISES: \_\_\_\_\_

PRESENT ZONING CLASSIFICATION: \_\_\_\_\_

WARD: \_\_\_\_\_ OWNER OCCUPIED/COMMERCIAL: \_\_\_\_\_

COMMERCIAL/RENTAL: \_\_\_\_\_

TYPE OF OCCUPANCY IN JUNE 1995: \_\_\_\_\_

TYPE OF USE PRESENTLY: \_\_\_\_\_

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WILL ANY IMPROVEMENTS OR CHANGES BE MADE TO THE STRUCTURE?

YES/NO \_\_\_\_\_

A BUILDING PERMIT MAY ALSO BE REQUIRED UNDER SEPERATE APPLICATION.

(IF YES): DESCRIBE AND GIVE AND ESTIMATE OF COSTS FOR CHANGES:

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ARE WATER, SEWER, ELECTRIC, GAS AND INSURANCE PROVIDED: \_\_\_\_\_

(CIRCLE ALL THAT ARE APPLICABLE/EXPLAIN ANY DELETIONS: \_\_\_\_\_

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HAVE PROVISIONS BEEN MADE FOR OFF STREET LOADING AND PARKING?

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DESCRIBE/GIVE AREA AND NUMBER OF PARKING SPACES: \_\_\_\_\_

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DATE PROPOSED OCCUPANCY WILL COMMENCE AND END: \_\_\_\_\_

\_\_\_\_\_

FEES: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DATE: \_\_\_\_\_

REJECTED: \_\_\_\_\_ DATE: \_\_\_\_\_

ZONING OFFICER: \_\_\_\_\_

REASON:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SHOULD YOUR APPLICATION BE REJECTED BY THE ZONING OFFICER; YOUR APPLICATION WILL AUTOMATICALLY BE REVIEWED BY THE ZONING HEARING BOARD.

HOWEVER; YOU WILL NEED TO COMPLETE AND SUBMIT THE APPLICATION FOR A HEARING BEFORE THE BOARD.

APPLICATION FOR ZONING CERTIFICATE  
PLOT PLAN  
AND ARCHITECTURAL DRAWINGS  
ATTACHMENT

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PLEASE SHOW ACCURATELY AND COMPLETELY THE LOCATION, DIMENSIONS AND NATURE OF ANY LOT OR STRUCTURE INVOLVED IN THE APPLICATION. A DRAWING THAT SHOWS THE LOT(S) DIMENSIONS, THE LOCATION AND DIMENSIONS OF ALL EXISTING AND PROPOSED STRUCTURES AND THE DISTANCES OF THE STRUCTURES FROM ONE ANOTHER AND THE ADJOINING LOT/PROPERTY LINES.

IN ADDITION TO YOUR SUBMITTAL OF DIMENSIONS AND SKETCHES YOU MAY BE REQUIRED TO ATTACH A CERTIFIED COPY OF ARCHITECTURAL DRAWINGS.

YOU MAY USE ADDITIONAL SHEETS IF NECESSARY.

# APPLICATION FOR HEARING BEFORE THE ZONING HEARING BOARD

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IDENTIFICATION OF APPLICANT:

NAME/ADDRESS/PHONE NUMBER OF APPLICANT: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

OWNERS OF RECORD OF PROPERTY: \_\_\_\_\_

\_\_\_\_\_

OWNERS OF RECORD CURRENT ADDRESS/PHONE NUMBER: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I CERTIFY THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER(S) OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER(S) OF RECORD TO MAKE THIS APPLICATION AS HIS/HER (THEIR) AUTHORIZED AGENT.

DATE: \_\_\_\_\_ PRINT NAME OF APPLICANT: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

TYPE OF REQUEST: \_\_\_\_\_ SPECIAL EXEMPTION \_\_\_\_\_ VARIANCE

\_\_\_\_\_ APPEAL FROM ACTION OF THE ZONING OFFICER

\_\_\_\_\_ OTHER

BRIEF DESCRIPTION OF REQUEST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

# APPLICATION FOR HEARING BEFORE THE ZONING HEARING BOARD

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Property Information:

Location: \_\_\_\_\_

Map#: \_\_\_\_\_ Date purchased: \_\_\_\_\_ Lot Area: (sq ft) \_\_\_\_\_

Lot Width: \_\_\_\_\_ Lot Depth: \_\_\_\_\_

Present Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Certification by Applicant: I hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief.

Date: \_\_\_\_\_ Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

To be completed by Municipality/OFFICIAL USE ONLY

Legal Notice/Advertisement Date: \_\_\_\_\_

Copy Attached: \_\_\_\_\_

Hearing Date: \_\_\_\_\_