

LOYALSOCK TOWNSHIP  
 2501 E. Third St.  
 Williamsport, PA 17701  
 Phone 570-323-6151

# ZONING APPLICATION

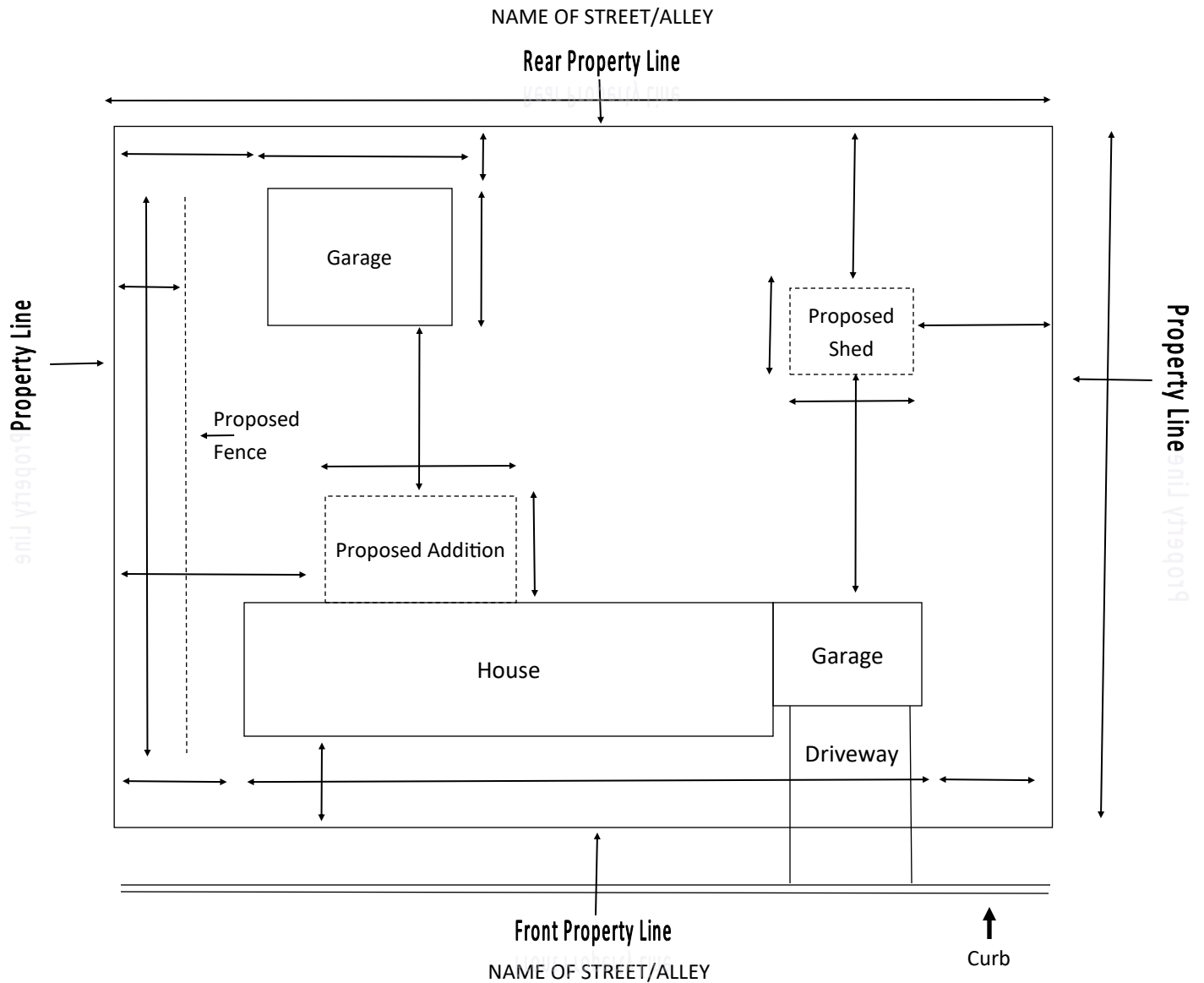
Application Date _____	Permit Type _____	Sign _____	Sign Type _____
_____	Zoning ___ Driveway/Parking Lot _____	Square Feet of Sign _____ Fee _____	

<b>LOCATION OF</b>	ADDRESS _____
<b>Of Project</b>	Lot Dimensions: Width _____ Depth _____ Zoning District _____
Estimated Start Date _____	End Date _____ Tax Map Parcel # _____

<b>TYPE OF IMPROVEMENT/ ACTIVITY</b>	<input type="checkbox"/> New Building <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Relocation <input type="checkbox"/> Accessory Use/Structure <input type="checkbox"/> Change of Use <input type="checkbox"/> Signage <input type="checkbox"/> Agricultural Use
<b>PROPOSED USE</b>	<b>Residential</b> <input type="checkbox"/> One Family <input type="checkbox"/> Two or more family (enter number _____) <input type="checkbox"/> Apartment <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Garage <input type="checkbox"/> Shed <input type="checkbox"/> Carport <input type="checkbox"/> Swim Pool <input type="checkbox"/> Fence/Wall <input type="checkbox"/> No Impact Home Based Business <input type="checkbox"/> Home Occupation <input type="checkbox"/> Other (Specify) _____
	<b>Nonresidential</b> <input type="checkbox"/> Recreation <input type="checkbox"/> Church <input type="checkbox"/> Industrial <input type="checkbox"/> Restaurant <input type="checkbox"/> Utilities <input type="checkbox"/> Medical <input type="checkbox"/> Service Station, Repair Garage <input type="checkbox"/> Office, Professional <input type="checkbox"/> School/Educational <input type="checkbox"/> Store/Retail <input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Business ID Sign <input type="checkbox"/> Institutional <input type="checkbox"/> Service Business <input type="checkbox"/> Other (Specify) _____
<b>Describe in detail proposed use/improvement</b> _____	
_____	

_____ Driveway (Blacktop ___ or Concrete ___) New ___ Alter ___ Replace ___ Length and Width of Drive _____
<b>ESTIMATED COST OF CONSTRUCTION/IMPROVEMENT \$</b> _____
Water Supply Public ___ Well ___ Sewage Public ___ Private ___
Number of Off Street Parking Spaces: Existing _____ New _____ Total Number of Spaces _____
<b><u>Building and Yard Dimension</u></b>
Number of Stories _____ Height of Building, Structure, or Fence Being Applied for _____
Length and Width of Proposed Structure _____ ft X _____ ft Total Square Foot _____
Total Lot Area in Acres _____ In Square Feet _____
<b><u>Setbacks: Distance from property lines to building, addition, or structure.</u></b>
Front Yard Setback _____ Rear Yard Setback _____ Side Yard(s) Setback _____
Is property a corner lot? ___ Yes ___ No (Corner properties will have two front yards)

## PLOT PLAN EXAMPLE



This is an example of a plot plan.

Please create a plan for the property in which you are applying for a zoning permit by showing the property line boundaries along with all existing and proposed structures. Your drawing does not have to be to scale, but must be an accurate portrayal of an overhead view of the property. Please submit two copies of your drawing with the permit application. The comments listed below are to assist you in drawing a plan.

1. Indicate the dimensions of the property and structures. Existing structures should be drawn with solid lines. Proposed structures should be drawn with dotted lines.
2. Indicate the name of the street/alley. If the property has a street/alley along the side, please indicate it.
3. Indicate the distance from the property lines to the existing structures closest to the property lines.
4. Indicate the distance between the proposed structure and the closest surrounding existing structure and property lines.
5. Indicate the distance from the curb to the closest structure to the curb.

**\*\* For Pools, either above ground or inground, please indicate the distance from all property lines.**

**Owner** Name \_\_\_\_\_  
**Or** Mailing Address \_\_\_\_\_  
**Lessee** Phone No. (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email (optional) \_\_\_\_\_

**Contractor/** Name \_\_\_\_\_  
**Builder of** Address \_\_\_\_\_  
**Project** Phone No. (Office) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Contractor Reg. No. \_\_\_\_\_

**Architect/** Name \_\_\_\_\_  
**Engineer** Address \_\_\_\_\_  
Phone \_\_\_\_\_

**Is The Applicant the Owner?** \_\_\_YES \_\_\_NO

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of the jurisdiction.

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Signature of Applicant

\_\_\_\_\_

Date Signed