

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

ZONING APPLICATION

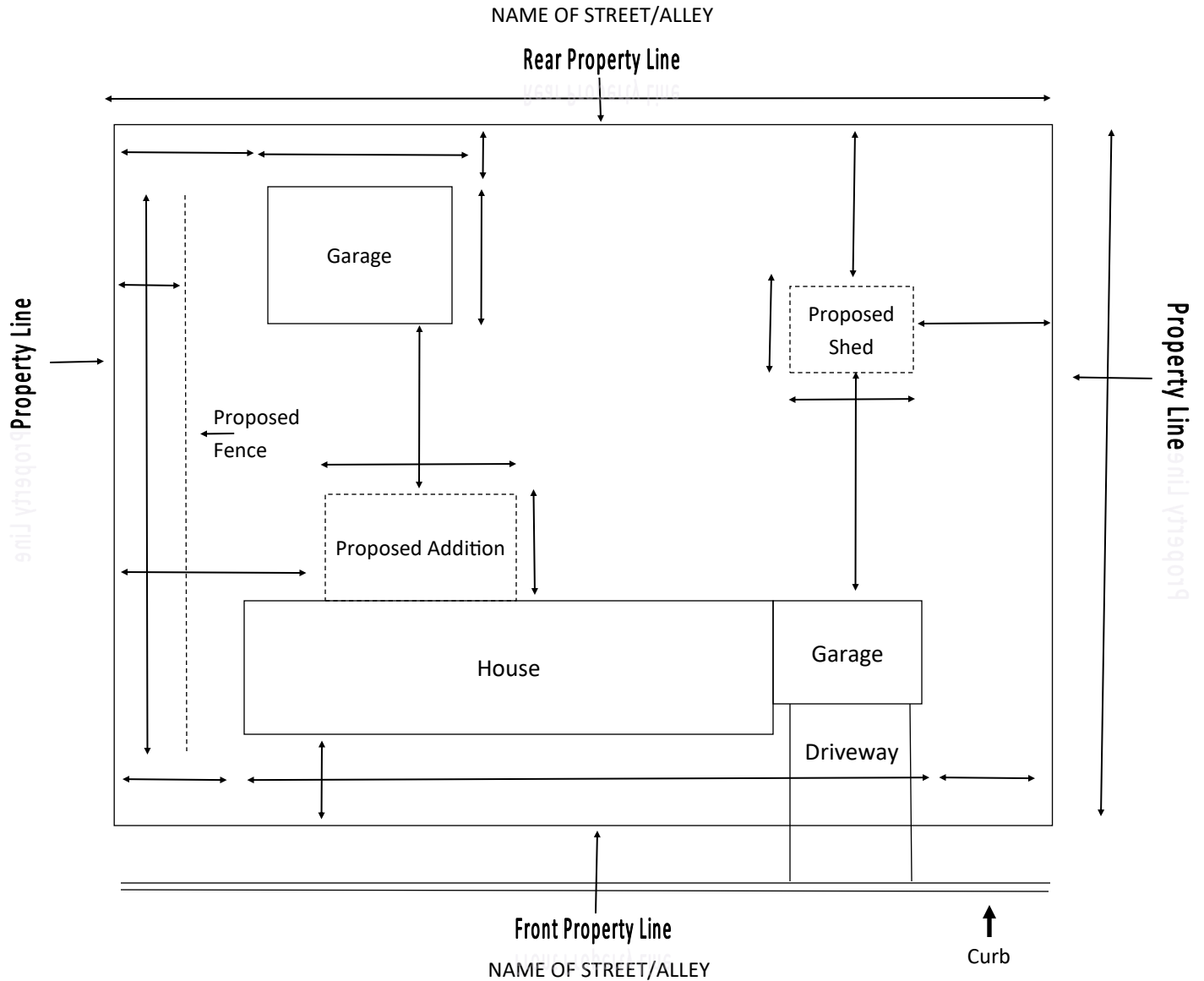
Application Date ____/____/____	Permit Type Zoning ____ Driveway/Parking Lot ____	Sign ____ Sign Type _____	Square Feet of Sign _____ Fee _____
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LOCATION OF Of Project	ADDRESS _____ Lot Dimensions: Width _____ Depth _____ Zoning District _____
Estimated Start Date _____	End Date _____ Tax Map Parcel # _____

TYPE OF IMPROVEMENT/ ACTIVITY	<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
PROPOSED USE	Residential <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) _____
	Nonresidential <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) _____
Describe in detail proposed use/improvement _____	

____ Driveway (Blacktop ____ or Concrete ____)	New ____ Alter ____ Replace ____	Length and Width of Drive _____
ESTIMATED COST OF CONSTRUCTION/IMPROVEMENT \$ _____		
Water Supply	Public ____ Well ____	Sewage Public ____ Private ____
Number of Off Street Parking Spaces: Existing _____ New _____ Total Number of Spaces _____		
Building and Yard Dimension		
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 _____		
Setbacks: Distance from property lines to building, addition, or structure.		
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? <input type="checkbox"/> YES <input type="checkbox"/> 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

You may use the space below to sketch a plot plan of the proposed project (see page 2 for instructions) or you may use a separate sheet of paper.

Applications will not be accepted without a property drawn and submitted plot plan.

A large, empty rectangular box with a black border, intended for sketching a plot plan. The box is oriented vertically and occupies most of the lower half of the page.