

FEE: \$60.00

Borough of Sharon Hill

CODE ENFORCEMENT DEPARTMENT

250 Sharon Ave, Sharon Hill, PA 19079 Phone (610)586-8200 Fax (610)586-3991

ZONING APPROVAL APPLICATION

OFFICIAL USE

Application Received: ___/___/___

Reviewed by: _____

Zoning District: _____

Approved ___; Denied ___; N/A ___; ___/___/___

(Attach a plan & any additional documentation as may be needed for review of this application)

PROPERTY LOCATION IN SHARON HILL _____

Applicant's Name: _____

I am or, we are: ___ Owner ___ Equitable Owner ___ Tenant ___ Other

Applicant's Address: _____

Applicant's Phone#: _____

Applicant's Email: _____

Owner's Name: _____

Owner's Address: _____

Owner's Email: _____

Permits MUST be secured prior to the erection or alteration of any building, structure or portion thereof, including signs, prior to the use of a building or land and prior to the change or extension of nonconforming use:

I have read and acknowledge the aforementioned statement: (Initials) _____

Name of Contractor: _____

Contractor's Address: _____

Contractor's Phone#: _____ Fax#: _____

Contractor's Email: _____

Name of Legal Counsel (if represented): _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Phone#: _____ Fax#: _____

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FEE: \$60.00

PROPERTY USE DATA:

Proposed Use of Property: _____

Name of Business: _____

Existing Use of Property: _____

Name of Business: _____

Existing Nonconformity: Yes ___ No ___ (If yes, attach a narrative description of the nonconformity)

Lot Area: _____ sq. ft. Existing Impervious Area: _____ sq. ft.

Proposed Impervious Area: _____ sq. ft.

Required setbacks

Front: _____; Rear _____; Sides; _____ / _____ Height: _____

Existing setbacks

Front: _____; Rear _____; Sides; _____ / _____ Height: _____

Proposed setbacks

Front: _____; Rear _____; Sides; _____ / _____ Height: _____

Easement Area on lot? Yes ___ No ___ Easement is for: _____ (Attach description & note on plan)

ENVIRONMENTAL:

A Stormwater Management Plan (SMP) is required for activities proposing new impervious area of 1,000sq.ft. or more.

A Street Occupancy Permit is required for work in the public right-of-way.

All earth disturbance activities require compliance with Erosion and Sedimentation Control Regulations.

I have read and acknowledge the aforementioned statement: (Initials) _____

The undersigned Applicant hereby applies for a Zoning Permit to be issued on the basis of the information contained within this application and the attached supporting documents. The Applicant hereby certifies that all information and attachments are true and correct. The Applicant is responsible for the application fee of \$60.00. The approval or denial of this application may be appealed to the Board of Appeals per The Zoning Ordinance. Any oversight or omission during the review process is not a waiver of the requirements of the Ordinance and does not relieve the Applicant from compliance therewith.

Applicant Signature: _____ Print Name: _____

Date: ___ / ___ / ___