

Hazle Township Zoning

PO Box 506

Harleigh, Pa. 18225

P-570-455-2030 C-570-233-0126

Physical Address: 101 West 27th Street Hazle Township, Pa. 18202

www.hazle township.com zoning@hazletownship.com

DATE: _____

APPLICATION NUMBER _____

ZONING PERMIT APPLICATION

Zoning Permit applications are required prior to using land or a structure, or construct, alter or demolish a structure in Hazle Township. Applications must be complete upon submittal and, must be reviewed by the Zoning Officer for approval.

SECTION 1 DATE OF APPLICATION AND PROPERTY LOCATION

A. Property Address or Location:

B. Deed Owner and Address:

- Contact Number: _____
- Contact Email: _____

SECTION 2. APPLICANT INFORMATION IF DIFFERENT THAN OWNER

A. Applicants Name and Address:

Contact Number: _____ Email: _____

B. Stake or Interest in Property

☐ Owner of Record ☐ Tenant with Lease ☐ Option Holder

☐ Buyer Agreement of Sale ☐ Other

SECTION 3. REASON FOR APPLICATION

☐ New Building ☐ Sign ☐ Change of Use

☐ Shed ☐ Pool

☐ Gazebo ☐ Deck

☐ Fence ☐ Carport

TYPE OF WORK

☐ New Construction

☐ Addition

☐ Repair/Alter/Change

☐ Demolition

SECTION 4 PRESENT USE OF PROPERTY

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

C. Size and Type of Existing Lot

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

Corner Lot: Yes or No Number of existing buildings on Lot: _____

SECTION 5. ZONING INFORMATION (COMPLETE FOR NEW BUILDINGS, ADDITIONS and CHANGES OF USE of EXISTING STRUCTURES)

Lot Size (sq ft) Current: _____ Proposed: _____

Lot width (ft) Current: _____ Proposed: _____

Lot Depth (ft) Current: _____ Proposed: _____

Building Setback (ft) Current: _____ Proposed: _____

Front Yard: _____ Left Side: _____ Right Side: _____ Rear: _____

Building Height: Current: _____ Proposed: _____

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

Description of Project:

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 is authorized by the owner to make this application and the applicant agreed to inform the owner of the approval (with any conditions) or denial of the application.

Signature of Owner _____ Date

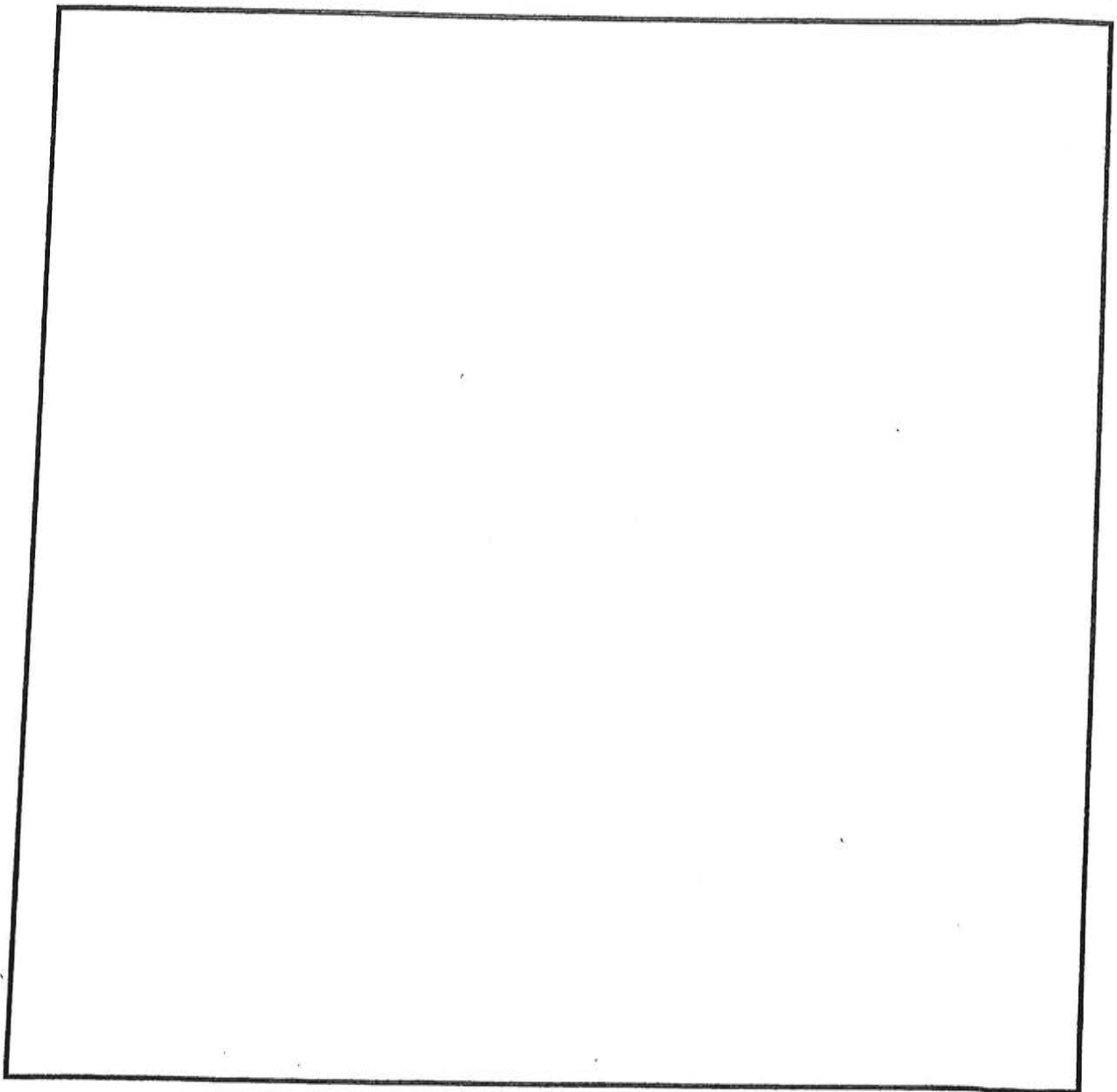
Signature of Applicant _____ Date

****\$30.00 Residential Fee****

****\$80.00 Commercial Fee****

SKETCH PLAN

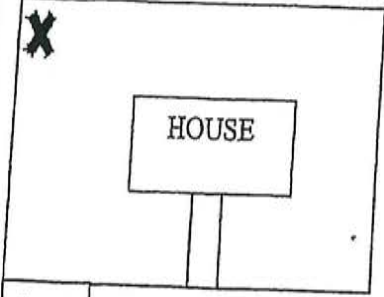
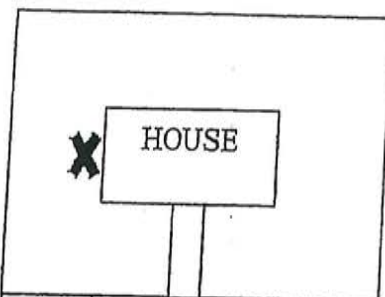
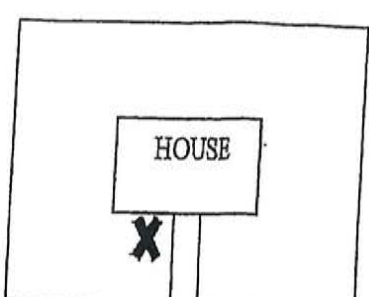
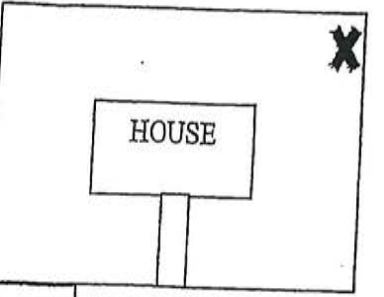
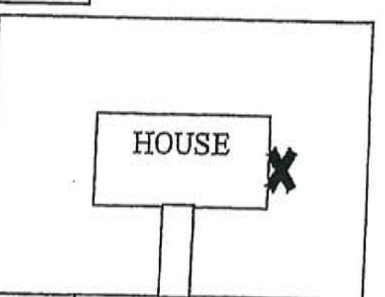
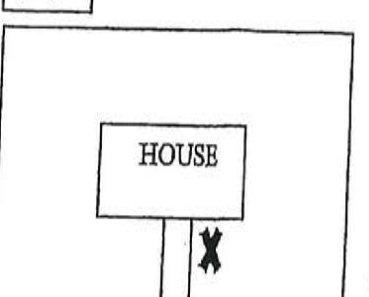
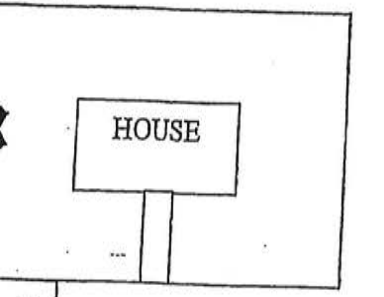
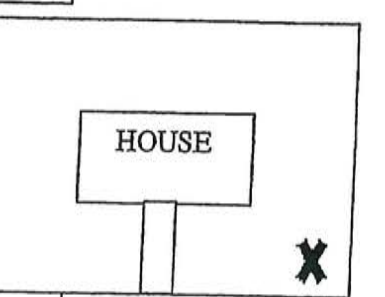
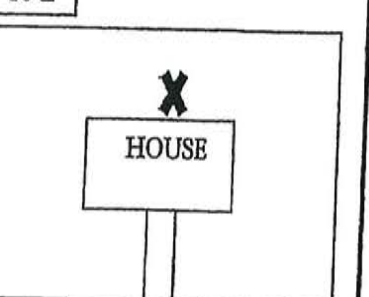
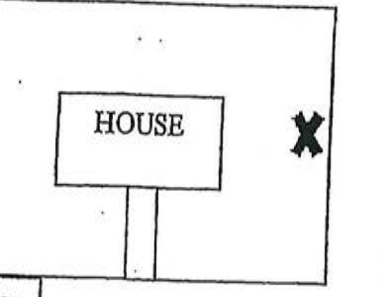
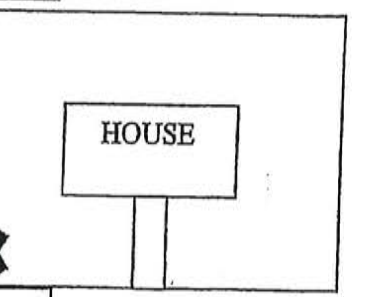
Indicate North



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

Date: _____

Signature of Applicant

 <div>1 ☐</div>	 <div>5 ☐</div>	 <div>9 ☐</div>
 <div>2 ☐</div>	 <div>6 ☐</div>	 <div>10 ☐</div>
 <div>3 ☐</div>	 <div>7 ☐</div>	 <div>11 ☐</div>
 <div>4 ☐</div>	 <div>8 ☐</div>	

Please choose which of the options shows where you wish to place the structure on the property.

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.

