Borough of Highspire

640 ESHELMAN STREET HIGHSPIRE, PA 17034 Office (717) 939-3303 - Fax (717) 939-3371

APPLICATION FOR ZONING PERMIT

IMPORTANT - Applicant to complete all items in Sections: I, II, III, & IV

I. PROPERTY INFORMATION - Use additional sheets and/or documentation as necessary.						
1. Property Location	:					
.,,	(Number	Street	City	State	Zip)	
2. Tax Parcel Numb	er:		3.Zoning Dis	trict:		
Use of	Assembly High Hazard Residential Type:	☐ Business☐ Institutional	☐ Education☐ Mercantile	□ Factory Industrial□ Storage□ Utility & Accessory		
5. If Vacant, Most R	ecent Use of Property:					
6. Date Property Va	cated (if known):					
7. Current Use Pern	nitted By:					
☐ By Right ☐ S	Special Exception	Conditional Use				
☐ Prior Variance - A	Authorizing Ordinance	Section:	Date G	Franted:	=	
8. Date of Purchase	by Current Owner:					
		Month , Date, Year				
9. Is the Property	☐ Owner Occupied	☐ Rental Property				
10. Identify Lot Dime	ensions: (Width x Depth i	n Feet)				
11. Identify Existing	Improvements on Lot:	(structures, etc.)				
12. Identify Existing	Signs on Lot:					

1. Propos					l
☐ Asser	OSED PROJECT INFORMA	TION			
	sed Use of Property:				
☐ High F		☐ Educ	ation Factory Indus	strial	
	Hazard 🖵 Institutiona	I ☐ Merc	· ·		
	ential Type:		Utility & Acce	essory	
	sed Use Permitted By:				
☐ By Rio		•	ial Exception		
☐ Condi	tional Use Authorizing O	rdinance Section:_			_
III. PROF	POSED WORK - Describe in det	ail the proposed project	. Use additional sheets and/o	r documentation as necessary.	
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-					
-					_
					-
-					
_					
IV. IDENT	IFICATION - To Be Completed B	ly All Applicants.			
	Name		iling Address	Telephone No.	Fax No.
	. tame	(Number, Str	eet, City, State, and Zip)	1010011011011011	1 0.7.1101
Owner					
or					
Lessee					
Builder					
Builder Architect					
Builder Architect and/or					
Builder Architect					
Builder Architect and/or Engineer	y cartify that the proposed wo	rk is authorized by	he owner of record and	that I have been authorize	red by the owner to
Builder Architect and/or Engineer I hereby	y certify that the proposed wo				
Builder Architect and/or Engineer I hereby	nake this application as his au	thorized agent and	we agree to conform to		s jurisdiction.
Builder Architect and/or Engineer I hereby		thorized agent and			
Builder Architect and/or Engineer I hereby	nake this application as his au	thorized agent and	we agree to conform to		s jurisdiction.
Builder Architect and/or Engineer I hereby n Signature	nake this application as his au of Applicant	thorized agent and Ado	we agree to conform to		s jurisdiction.
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Builder Architect and/or Engineer I hereby n Signature	nake this application as his au of Applicant	thorized agent and Ado	we agree to conform to		s jurisdiction.
Builder Architect and/or Engineer I hereby n Signature Contractor	nake this application as his au of Applicant ors Building License Numbe	thorized agent and Ado	we agree to conform to		s jurisdiction.
Builder Architect and/or Engineer I hereby n Signature Contractor	nake this application as his au of Applicant ors Building License Numbe	thorized agent and Ado	we agree to conform to		s jurisdiction.
Builder Architect and/or Engineer I hereby n Signature	nake this application as his au of Applicant ors Building License Numbe	thorized agent and Ado	we agree to conform to		s jurisdiction.

DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

V. VALIDATION					
1. Zoning Permit Number:					
2. Date Zoning Permit Issued:					
3. Date Zoning Permit Expires:					
4. Zoning Permit Fee \$					
5. Flood Hazard Area:					
6. Approved by:					
ZONING OFFICER		DATE			
VI. ZONING PLAN EXAMINERS NOTES					
DISTRICT:					
USE:					
FRONT YARD:					
SIDE YARD:	SIDE YARD:				
REAR YARD:					
NOTES:					

