TAX PARCEL NUMBER _____

KIDDER TOWNSHIP
P. O. Box 576
Lake Harmony PA 18624

ZONING PERMIT APPLICATION

This application is submitted in accordance with Ordinance #86, as amended

This Information Must Be Filled Out Completely By All Applicants

PLEASE LEGIBLY PRINT ALL INFORMATION

1. OWNER INFORMATION

Name _____ **Tel # ( )**_____

Mailing Address _____ _____ _____ _____
Street /P. O. Box City State Zip

2. APPLICANT INFORMATION (if other than owner)

Name: _____ **Telephone # ( )** _____

Mailing Address: _____ _____ _____ _____
Street/P.O. Box City State Zip

If Tenant, does tenant have Owner's consent for proposed work? ( ) Yes ( ) No

3. PROPERTY INFORMATION

Lot Number _____ **Street/Route Name** _____
Development/Area _____
Lot Width _____ **Lot Length** _____ **Total Acreage** _____
Present Use _____
Sewage System: ( ) Public ( ) Private Water Supply: ( ) Public ( ) Private

4. A ZONING PERMIT IS REQUESTED FOR: (Also complete applicable description section)

1-( ) Perc Test
2-( ) Dwelling 5-( ) Porch/Deck/Patio 8-( ) Pool. 11-( ) Change of Use
3-( ) Garage 6-( ) Addition 9-( ) Sign 12-( ) Other
4-( ) Shed 7-( ) Ext. Alteration 10-( ) Comm. Bldg

PLEASE COMPLETE THE APPLICABLE DESCRIPTION SECTION(S) ON PAGE 2 AND 3

==========

OFFICE USE ONLY

DATE RECEIVED _____

ZONING DISTRICT _____ **PRESENTLY CONFORMING? ( ) YES ( ) NO** _____

WILL REQUESTED ITEM(S) BE CONFORMING? ( ) YES ( ) NO _____

APPLICATION APPROVED? ( ) YES ( ) NO DATE _____

IF NO, REASON: _____

COMMENTS _____

Signature of Zoning Officer _____ **Permit Number** _____

PAID CHECK # _____ **DATE** _____

==========

REFERRED TO ZONING HEARING BOARD? ( ) NO ( ) YES : HEARING DATE _____
REFERRED TO PLANNING COMMISSION? ( ) NO ( ) YES : HEARING DATE _____
REFERRED TO BOARD OF SUPERVISORS? ( ) NO ( ) YES : HEARING DATE _____

ACTION OF REFERRAL:

( ) Approved _____
( ) Denied _____

1 Perc Test

( ) Single-Family Home ( ) 2-Family Home

( ) 3 or more Families (# of families _____)

( ) Commercial (Nature of Business_____)

****

2 New Dwellings Only

# of Families _____ # of Stories High _____ # of Bedrooms _____ # of Baths _____

Sewage Permit # _____

Size of Structure: Width _____ Depth _____ Height _____ Total Sq. Ft. _____

Distance to: Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

****

3 Garage

( ) Attached ( ) Detached If detached: Distance from House _____

Size of Garage: Width _____ Depth _____ Height _____ Total Sq. Ft. _____

Distance To: Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

****

4 Shed

Size of Shed: Width _____ Depth _____ Height _____ Total Sq. Ft. _____

Distance To: Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

Distance From House _____

****

5 Porch, Deck, Patio

Size of Porch/Deck/Patio: Width _____ Length _____

( ) Attached To Structure ( ) Freestanding ( ) With Roof ( ) Without Roof

( ) Enclosed ( ) Not Enclosed ( ) Above Ground ( ) On Ground

Distance To: Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

****

6 Addition

Describe_____

Width _____ Depth _____ Height _____ Number of Floors: _____ Total Sq. Ft. _____

# of Bedrooms _____ # of Bathrooms _____

If Bedrooms or Bathrooms, Sewage Permit # _____

Distance To: Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

****

7 Exterior Alteration

Describe_____

If Applicable, Width _____ Depth _____ Height _____ Total Sq. Ft. ____

****

8 Pool

( ) Inground ( ) Above Ground

If Inground, type of fence (4' High) surrounding ( ) pool or ( ) yard _____

Width _____ Length _____ Depth at Deepest Point _____ Shallowest Point _____

Distance from Front Property Line _____ Rear Property Line _____

Left Side Line _____ Right Side Line _____

****

9 Sign

( ) Permanent ( ) Temporary

Outside Dimensions of Sign Face: Length _____ Height _____ Total Sq. Ft. _____

Distance from ground to: Bottom of Sign _____ Top of Sign _____

Proposed Location of Sign _____

_____

ATTACH SKETCH OF SIGN INCLUDING WORDING TO BE USED

****

10 Commercial Bldg.

Nature of Business _____

Building To Be Used For _____

Sewage Permit # _____

If Hotel/Motel, # of Units: _____

Size: Width _____ Depth _____ Number of Floors _____ Total Sq. Ft. _____

Distance from Front Property Line _____ Rear Property Line _____

Side Line _____ Right Side Line _____

****

11 Change of Use

Present Use _____

Proposed Use _____

****

12 Other

Please Describe in Full _____

_____

_____

_____

_____

****

PLEASE COMPLETE PAGE 4

****

COMPLETE THIS SECTION IF PERMIT INCLUDES INITIAL CONSTRUCTION ON A LOT OR NATURAL RESOURCE PRODUCTION

Does this lot or parcel contain ANY of the following:

	Yes	No
Wetlands	( )	( )
Steep Slopes	( )	( )
Natural Features such as		
Rock Outcrops	( )	( )
Rare or Endangered Species	( )	( )
Floodplain	( )	( )

****

CERTIFICATION

I certify that the information provided in this application is accurate and correct to the best of my knowledge and I agree to comply with all requirements established by the Kidder Township Zoning Ordinances and all other applicable Federal, state, and local regulations. I also understand that NO CONSTRUCTION OF ANY KIND MAY BE STARTED BY ANYONE until a building permit and all other applicable permits have been issued. I understand that if the work for which this permit has been granted is not started within year and completed within two years, this permit shall expire and a new zoning permit must be obtained.

_____

Printed Name of Owner / Applicant

_____

Signature of Owner / Applicant **Date**

Please include a Plot Plan showing the following:

1. **Indicate length of all property lines.**
2. **Show all structures on property and distances from property lines.**
3. **Indicate names of streets abutting property.**
4. **If lakefront, indicate at rear of property.**
5. **Show driveway location and dimensions.**
6. **Indicate location of well and septic system.**
7. Grading and drainage plan.