

WASHINGTON TOWNSHIP ZONING OFFICE

1390 Fayette Avenue, Belle Vernon PA 15012

(724) 929-6333 MOBILE (724) 434- 8431

APPLICATION FOR ZONING PLAN EXAMINATION AND ZONING PERMIT

1. Type of Improvement

___New Construction ___Addition ___Alteration ___Repair
___Roof and/or Siding ___Driveway (requires driveway application also) ___other

2. Owner and property Information Residential or Commercial (circle one)

Owners Name- _____
Address- _____ Phone- _____
City- _____ State- _____ Zip Code _____
Previous owner (if purchased with in last 2 years)- _____
Subdivision or lot plan- _____ Parcel # _____ Zoned _____
Present Use _____ Proposed Use _____

3. Project Scope

Starting Date _____ Estimated date of Completion _____ Estimated Cost _____
Size of Building _____ # of Units _____ Height in Stories _____
Characteristics of construction _____ Heated by _____ (Gas, Electric, etc.)
Number of bathrooms _____ Size of Lot _____
Brief Description of Project _____

This Application must include the following:

- Attached Sketch of lot and building Showing Property Lines, setbacks and Dimensions
- Check or money order made out to Washington Township Supervisors (no Cash will be accepted)

Property owner May be required to obtain a Uniform Construction Code Permit for your project

4. Applicant Signature (Application will Become Null and Void if any information is found to be false)

Applicant Signature _____ Date of Application _____

5. Official use only

Approved ___ Denied ___ Need Approval from Zoning Hearing board _____
Reason Denied _____
Reason for Zoning Hearing _____
Zoning Office Signature _____ Date Approved _____
Permit Number _____ Permit fee _____ Check or Money Order # _____
Hearing Board Approval Signature _____ Date _____