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TOWNSHIP OF PLAINS
ZONING/CODE ENFORCEMENT OFFICE
126 North Main Street
Plains, PA 18705

ZONING COMPLIANCE APPLICATION # _____

CLOSING DATE: _____

PER UNIT COST: _____

Commercial \$175.00

LOCATION, OWNERSHIP AND PRESENT USE OF PROPERTY:

1. Address _____ Zoning District _____

2. **Current** Owner Information: Name: _____

Owner Address: _____ Phone: _____

3. **NEW (Business)** Information: Name: _____

Contact Name: _____

Mailing Address: _____ Phone: _____

4. Present Use of Structure _____

5. Present Use of Land _____

6. Will the Use of the Building/Land change? YES NO

6A. If YES indicate proposed use _____

Access/Egress adequate for use? _____ Number of exits (building) _____

Adequate number of smoke detectors located throughout the building? _____ (Number) _____

Fire Extinguishers operational and accessible? _____ Exits Clearly Marked? _____

Covers on receptacles/outlets? _____ Railings on stairways? _____ Number of steps _____

A. Name & 24 Hour Local Contact number (Landlord/Manager)

B. CONTACT INFORMATION

1. Name & Phone Number Person with access for inspection _____

The undersigned verifies that all statements on this application are true & correct. The undersigned further states that he understands any false statements made herein are subject to the penalties of 18 PA S.C. Section 4904, relating to unsworn falsification to authorities.

IF UNIT FAILS INSPECTION ADDITIONAL PER UNIT FEE WILL BE ASSESSED

Applicant's Signature _____

C. DATES ACTION TAKEN:

1. Approved Yes No BY: _____ Date _____

2ND Inspection Date: _____ Passed: Yes No 3RD Inspection Date: _____ Passed: Yes No