

**PLAINS TOWNSHIP  
ZONING PERMIT APPLICATION**

126 North Main Street Plains, PA 18705  
Email: [zoning@plainstownship.org](mailto:zoning@plainstownship.org)

Phone: 570-829-3439 ext 4141  
Fax: 570-208-2642

ZONING PERMIT NUMBER: \_\_\_\_\_

1. ADDRESS/LOCATION OF PROPERTY:

\_\_\_\_\_  
\_\_\_\_\_

2. ZONING DISTRICT IN WHICH THE PROPERTY IS LOCATED: \_\_\_\_\_

3. APPLICANT: NAME, ADDRESS, PHONE NUMBER & EMAIL ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. OWNER'S NAME, ADDRESS and PHONE NUMBER & EMAIL ADDRESS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. APPLICATION IS HEREBY MADE TO:

- ERECT A STRUCTURE      PRINCIPAL       ACCESSORY
- ADD TO A STRUCTURE      PRINCIPAL       ACCESSORY
- CHANGE USE OF STRUCTURE
- ERECT A FENCE (Height \_\_\_\_\_ Material \_\_\_\_\_)
- INSTALL SWIMMING POOL     IN-GROUND     ABOVE-GROUND
- INSTALL OFF-STREET PARKING AREA
- ERECT A SIGN

ESTABLISH A HOME OCCUPATION

USE OF LAND WITHOUT ANY STRUCTURE

APPEAL OF VIOLATION NOTICE

OTHER (PLEASE LIST) \_\_\_\_\_

6. PROVIDE A NARRATIVE WHICH ACCURATELY EXPLAINS THE PROPOSED USE OF THE PROPERTY BASED UPON THE ITEM CHECKED UNDER NO. 5: (Use Additional Sheets if Necessary)

\_\_\_\_\_  
\_\_\_\_\_

7. SIZE OF LOT:

\_\_\_\_\_ WIDTH \_\_\_\_\_ DEPTH  
\_\_\_\_\_ SQUARE FEET/ACRES

8. PROVIDE THE LOCATION OF PROPOSED STRUCTURE/USE ON LOT, INCLUDING ADDITION IF APPLICABLE

\_\_\_ FEET TO FRONT YARD PROPERTY LINE

\_\_\_ FEET TO REAR YARD PROPERTY LINE

\_\_\_ FEET TO SIDE YARD PROPERTY LINE

\_\_\_ FEET TO SIDE YARD PROPERTY LINE

\_\_\_ MAXIMUM HEIGHT OF STRUCTURE.

9. PERCENT OF LOT COVERAGE: \_\_\_\_\_  
(SUM OF THE SQUARE FEET OF ALL STRUCTURES, EXISTING AND PROPOSED, DIVIDED BY SIZE OF LOT).

PROVIDE THE SQUARE FOOTAGE OF EACH STRUCTURE AND IMPERVIOUS SURFACE EXISTING AND PROPOSED BELOW:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. ATTACH A SITE PLAN DRAWN TO SCALE WHICH ACCURATELY ILLUSTRATES AS APPLICABLE THE EXISTING AND PROPOSED DEVELOPMENT INCLUDING BUT NOT LIMITED TO THE LOT SIZE, DIMENSION OF EXISTING AND PROPOSED STRUCTURES, SETBACK DISTANCES TO PROPERTY LINES AND OFF-STREET PARKING.

THE SITE PLAN SHALL BE CONSIDERED PART OF THE APPLICATION. FAILURE TO PROVIDE A SITE PLAN WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.

SHOULD APPLICANT BE PERFORMING ANY EXCAVATION WORK THEMSELVES ON THE PROPERTY, IT IS SUGGESTED TO CONTACT PA ONE CALL 800-242-1776

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE, CORRECT AND ACCURATE TO THE BEST OF MY KNOWLEDGE. IT IS UNDERSTOOD AND AGREED THAT AN ERROR, MISSTATEMENT OR MISREPRESENTATION OF MATERIAL FACT, EITHER WITH OR WITHOUT INTENTION ON THE PART OF THIS APPLICANT, SHALL CONSTITUTE SUFFICIENT GROUNDS FOR THE REVOCATION OF THE APPROVAL OF THIS PERMIT. I AM FAMILIAR WITH THE BOUNDARIES OF MY PROPERTY AND ATTEST THAT ALL CONSTRUCTION WILL TAKE PLACE COMPLETELY WITHIN THOSE BOUNDARIES.

IF YOU ARE BOTH THE APPLICANT AND THE OWNER OF THE PROPERTY, SIGN BOTH OF THE LINES BELOW. THE OWNER'S SIGNATURE IS ALWAYS REQUIRED. FAILURE TO PROVIDE OWNER'S SIGNATURE WILL RESULT IN APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.

FAILURE TO COMMENCE THE WORK/IMPROVEMENTS APPROVED UNDER THIS PERMIT WITHIN ONE YEAR FROM THE DATE OF APPROVAL SHALL RENDER THE APPROVAL AS NULL AND VOID.

PRIOR TO THE START OF CONSTRUCTION, YOU ARE REQUIRED CONTACT THE TOWNSHIP'S BUILDING INSPECTOR AT 570-704-9478 FOR A DETERMINATION AS TO WHETHER A BUILDING PERMIT IS REQUIRED.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER (REQUIRED)

\_\_\_\_\_  
DATE

APPROVED       DENIED

\_\_\_\_\_  
SIGNATURE OF ZONING OFFICER

\_\_\_\_\_  
DATE

**ALL INFORMATION BELOW IS TO BE COMPLETED  
BY THE PLAINS TOWNSHIP ZONING OFFICER.**

- A. IF THE PERMIT IS DENIED, THE ZONING OFFICER SHALL NOTE THE APPLICABLE SECTIONS/BASIS OF DENIAL BELOW:

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- B. A COPY OF THE ZONING OFFICER'S OFFICIAL LETTER OF DENIAL SHALL BE ATTACHED TO THIS PERMIT.

- C. HAS THE APPLICANT/OWNER REQUESTED AN APPEAL OF THE ZONING OFFICER'S DECISION TO THE ZONING HEARING BOARD?

YES       NO       UNDECIDED/PENDING

- D. IF APPLICABLE, DATE OF WRITTEN REQUEST OF APPEAL: \_\_\_\_\_

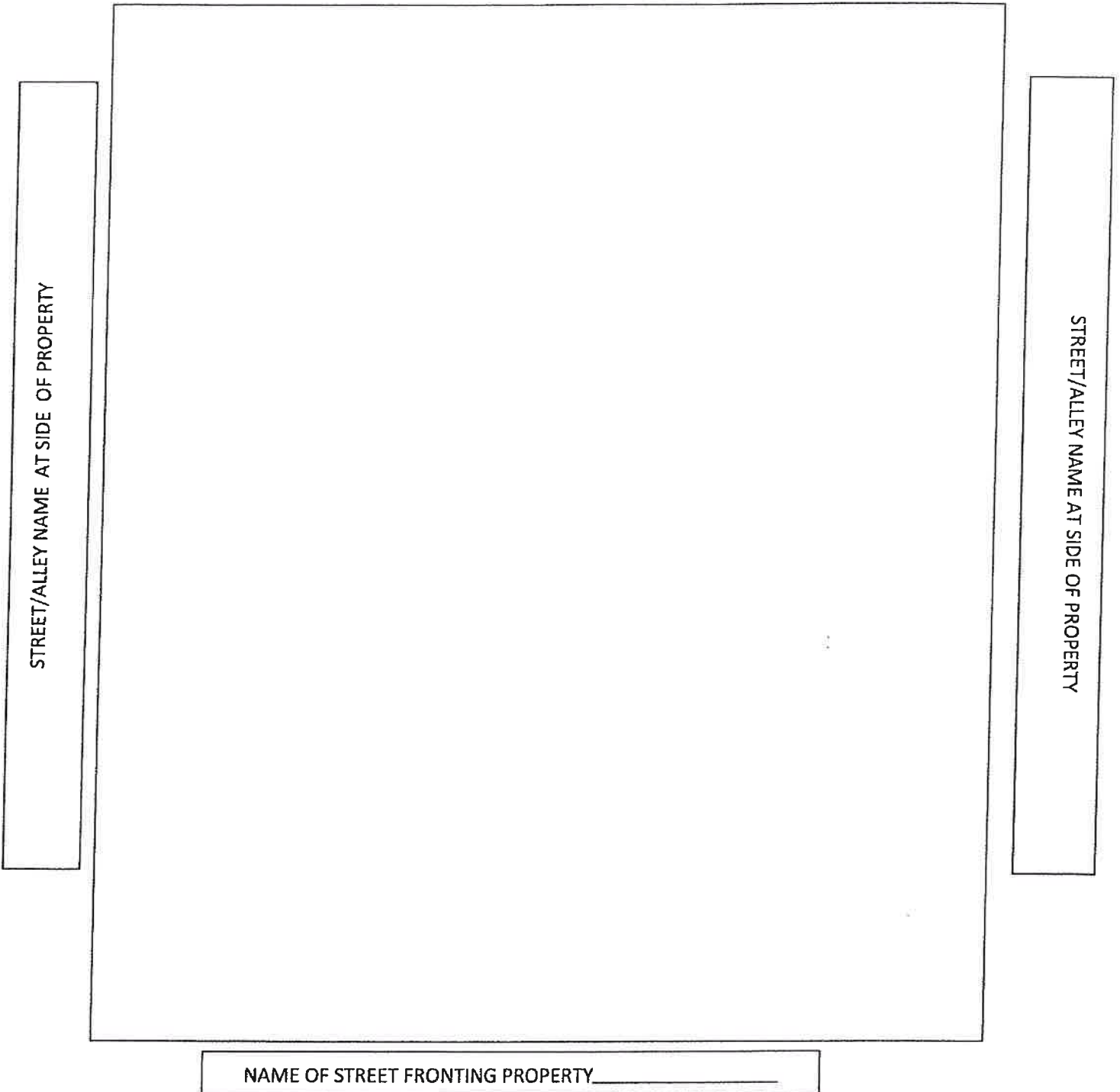
ATTACH COPY OF APPLICANT/OWNER'S WRITTEN REQUEST FOR AN APPEAL TO THE ZONING HEARING BOARD OR A COMPLETED APPLICATION FOR THE APPEAL TO THE ZONING HEARING BOARD.

- E. IF APPLICABLE, DATE OF SCHEDULED ZONING HEARING BOARD MEETING: \_\_\_\_\_

**ITEM 10 REQUIRED DRAWING**

Show the following distances: 1. Front of structure to front property line; 2. Rear of structure to rear property line; 3. Side of structure to side property lines; 4. Distance between new structure & existing structures and property lines. Include names of streets & alleys adjoining property if applicable. Feet to front yard property line \_\_\_\_\_ Feet to side yard property line for both sides \_\_\_\_\_ & \_\_\_\_\_ Feet to rear yard property line \_\_\_\_\_ Maximum Height \_\_\_\_\_

STREET/ALLEY NAME AT REAR OF PROPERTY \_\_\_\_\_



**Structure/fence will be built & located in accordance with the dimensions shown on the sketch above. Plains Township, its agents/employees are NOT responsible for any dimensions/property line locations in this sketch. Stated location of property lines is the responsibility of owner &/or agent. The undersigned affirms that the structure associated with this permit will be located entirely within the boundaries of the owner's property.**

Signature \_\_\_\_\_