

BROOKHAVEN BOROUGH
 Two Cambridge Road, Suite 100
 Brookhaven, PA 19015-1708
 Phone: 610-874-2557
 Fax: 610-874-2612

APPLICATION FOR ZONING PERMIT

PLEASE PRINT CLEARLY

DATE: _____

Please note: All information must be filled in or application will be returned.

Location of Property:		
<i>All Information must be completed</i>		<i>(Lot #, house #, street or road)</i>
OWNER INFORMATION:		
Name:		Phone #:
Mailing Address:		
Cell #:	Fax #:	Email:
PRINCIPAL CONTRACTOR INFORMATION:		
Name:		Phone #:
Mailing Address:		
Cell #:	Fax #:	Email:
PROPERTY INFORMATION:		
Current Use: Is the property or the current use non-confirming? If so, please describe below such non-conformity, indicate date of commencement, and state whether non-conformity is proposed to be expanded or changed.		
Proposed Building, Structure or Use:		
Zoning District:		
<i>Note: Compliance with Brookhaven Borough's Stormwater Management Ordinance is required.</i>		
Characteristics: <input type="checkbox"/> On-lot Septic <input type="checkbox"/> Public Sewer <input type="checkbox"/> Well <input type="checkbox"/> Public Water		
Is the site within an identified flood hazard area? <input type="checkbox"/> YES <input type="checkbox"/> NO		
Will any portion of the flood hazard area be developed? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<i>(if YES, Owner/Agent shall verify any proposed construction or development activity complies with requirements of the National Flood Insurance Program & the PA Flood Plain Management Act 166 of 1978, specifically Section 60.3)</i>		
Lowest Floor Elevation:		
Describe any proposed mechanical, plumbing, HVAC or other systems to serve proposed building or structure:		
Attach plot plan with exact size and location of any buildings/structures existing & proposed setback lines within which proposed building/structure is to be erected/altered & location of any existing easements or right of ways.		
Signature of Owner or Authorized Agent _____		Date _____

I certify that the code administrator or the code administrator's authorized representative shall have the authority to enter areas covered by such permit at any reasonable hour to enforce the provisions of the code(s) applicable to such permit.

BOROUGH OF BROOKHAVEN USE ONLY - DO NOT WRITE BELOW

Borough Zoning Permit Fee \$50.00

APPROVED

DECLINED

Date Approved: _____

- PA DEP:-- wetlands, stream crossing, etc. _____
- Brookhaven Borough Plumbing Permit _____
- Brookhaven Borough Electrical Permit _____
- Brookhaven Borough Stormwater Management Permit _____
- Brookhaven Borough Building Permit _____

PLOT PLAN

DATE: _____

Owner(s) of Property _____

Street Address _____

From Deed-House # _____ Lot # _____ Vol # _____ Page # _____

ZONING DISTRICT _____ Interior Corner of Property _____

←————— WIDTH OF YEAR —————→



REAR YARD FT

Show – Decks, Patios, Garages, Pools, Fencing (any hardscape)
Include dimensions and measurements to a point of reference

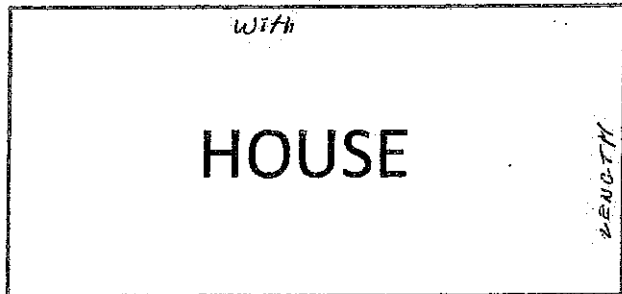
_____ FT DEEP

_____ FT DEEP



SIDE YARD FT

SIDE YARD FT



SET BACK FROM PROPERTY LINE

_____ FT

Show driveway

_____ FT

_____ FT

_____ FT FRONTAGE

SIDE WALK _____

CURB LINE _____