

## Township of Tobyhanna

105 Government Center Way Pocono Pines, PA 18350 570-646-1212

**Application Request** 

Zoning 🛛	Compliance $\Box$	Razing $\Box$
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Property Owner Information

Name:							
Mailing Address:						_Zip Code:	
Phone No:			_Cell Phon	e No.:			
E-Mail Address:							
		A					
		Appli	cant Info	ormation	1		
Applicant:							
Mailing Address:				_State:		_Zip Code:	
Phone No:			_Cell Phon	e No:			
E-Mail Address:							
		Contra	actor Info	ormation	1		
Contractor:							
Mailing Address:						_Zip Code:	
Phone No.:			_Cell Phor	ne No.:			
E-Mail Address:							
		Prop	erty Info	rmation			
Physical Address of prop	erty:						
Development:							
Zoning District: RR	R1 🗆	R2 🗆	os $\square$	с 🗆	CI 🗆	PRD 🗆	Preserve
Please check one: Prin	ary Home 🗌	Vacati	on Home [	]			

	Р	roposed Wo	rk		
Erect a Structure	Add a Structure 🗆	Repair/Repla	ice 🗆 Raz	ie 🗆	Other 🗆
Description of Proposed W	ork:				
Total Sq. Ft. of Newly Con	structed Area	(include: f	loor space, deck	s, porches, ga	arages, basements)
Total Sq. Ft. of Living Area	a, Deck	s/Porches	, Garage_		,Shed
Cost of Construction: \$			Stories:	Height:	ft
Present Use of Property:					
Basement: Y	-		-	″ □n □	
Off Street Parking Space(s)					
Lot Area Sq. Ft:					
Lot Coverage: Existing Sq buildings, include all areas					vered by a building of
Will there be any filling or	encroachment into wetl	and? Yes □ N	о 🗆		
Is structure in a designated	flood plain district? Ye	s 🗆 No 🗆			

## The following must be included with this application:

- 1) Complete dimensional drawn to scale plot plan of the lot showing proposed work and/or existing structure and building setback lines.
- 2) Dimensioned floor plans of proposed structure and four (4) elevation views showing height of proposed structure.
- 3) Storm Water calculations (if applicable)

The issuance of a Zoning Permit is based upon the facts stated and representations made in this application. A Zoning Permit may be revoked if the use and/or structure for which it has been issued violates any applicable Township, County, State or Federal Law or regulation, including but not limited to the Tobyhanna Township Zoning Ordinance. A Zoning Permit may also be revoked if it has been issued in error or if issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

The Zoning Officer does not guarantee to give opinions relating to the proposed construction under the Permit and does not warrant compliance with applicable laws or regulations by the issuance of a Zoning Permit. The applicant bears all responsibility for ensuring compliance with all applicable laws and regulations, including but not limited to compliance with the Tobyhanna Township Zoning Ordinance, the Tobyhanna Township Storm Water Management Ordinance, the Tobyhanna Township Subdivision and Land Development Ordinance, and any and all regulations governing wetlands and/or other natural resources , and all other Township, County, State and/or Federal laws and regulations. The issuance of a Zoning Permit does not guarantee that the property is a buildable lot.

Notice is hereby given that if the property described in this permit will require access to a highway under the jurisdiction of the Pennsylvania Department of Transportation, a Highway Occupancy Permit is required pursuant to the State Highway Law, before driveway access to a state highway is permitted. Access to a state highway shall be only as authorized by the Highway Occupancy Permit issued by the Pennsylvania Department of Transportation.

I hereby authorize the designated Tobyhanna Township Official to investigate, inspect, and examine the property set forth herein, including land and structures to determine compliance with the Tobyhanna Township Zoning Ordinance.

The Applicant is aware that prior to the occupancy or use of the property for which this Zoning Permit Application has been made the Applicant must apply, in writing, for a Certificate of Use and Occupancy.

By signing this Application, I certify that all facts set forth within the Application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of Tobyhanna Township. I understand that any false statements made herein are being made subject to the penalties of 18Pa C.S. 4904 relating to unsworn falsification to authorities.

Print Name:\_\_\_\_\_

Signature:\_\_\_\_\_

Date:

If applicant is other than owner, authorization notarized by the legal owner designating applicant is acting as representative on behalf of owner must accompany this application.

	Official Use (	Dnly	
Date Application Rec'd:	Receipt Number:	Amount \$	
Zoning Permit No		Fee \$	
Certificate of Occupancy		Fee \$	
Razing Permit No		Fee \$	
Port A Potty Permit No		Fee \$	
Sewage Permit No	Date Issued:	Fee \$	
HOP Permit #	Encroachment:	Fee \$	
Assessment Fee \$	Tapping Fee \$	Connection Fee \$	
Approved Denied	DateZoning Officer:		<u> </u>
Reason for Denial:			
Comments:			
IRC/IBC PERMIT REOUIR	ED Please contact Bureau	Veritas at 570-894-2801 with any buildin	g rela
questions.		· · · · · · · · · · · · · · · · · · ·	8