APPLICATION FOR ZONING PERMIT
Mount Pleasant Township, Washington County, PA

Mt. Pleasant Township **31 McCarrell Road** **Hickory, PA 15340** **Phone: 724-356-7928** **Fax: 724-356-7751**	**Permit Fees:** Consult Current Fee Schedule **PAYABLE TO MT. PLEASANT Twp.** **Zoning Permit $_____** Paid by check # _____ or Paid by cash – Amount _____ Received by _____ *(this serves as your receipt)*	**Zoning Permit No.**

APPLICANT INFORMATION (FINANCIALLY RESPONSIBLE PARTY) DATE_____

APPLICANT'S NAME_____ PHONE # _____

OWNERS NAME_____ PHONE # _____

ADDRESS (NO PO BOX):_____

CITY:_____ STATE:_____ ZIP _____

PROPERTY INFORMATION:

LOCATION OF PROPERTY:_____ PARCEL I.D. NUMBER:460- _____

ZONING DIST: Agricultural (A-1) □, Highway Commercial (B-1) □, Light Industrial (M-1) □, Rural Residential (R-1) □, Suburban Residential (R-2) □, Neighborhood Residential (R-3) □, Neighborhood Core (R-4) □

LOT SIZE:_____ WATER SUPPLY: □ PUBLIC □ PRIVATE

SEWAGE PERMIT# (IF NEEDED) _____ SEWAGE DISPOSAL: □ PUBLIC □ PRIVATE

PROPOSED USE OF BLDG/STRUCTURE: _____

DESCRIPTION OF CONSTRUCTION: _____

DIMENSIONS OF THE PROPOSED BUILDING: _____ TOTAL SQUARE FEET _____

ESTIMATED COST OF CONSTRUCTION $_____

SETBACKS: From Right Property Line:_____Ft., From Left Property Line:_____Ft.

From Front Property Line:_____Ft., From Back Property Line:_____Ft.

GPS COORDINATES FOR THE STRUCTURE (if needed) –
Latitude: North – **40** , Degrees, _____Minutes, - Longitude: West – **80** Degrees, _____Minutes

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IF REQUESTED, ATTACH A SKETCH PLAN OF THE PROPOSED WORK
OR ATTACH PLAT PLAN WITH THIS INFORMATION.
Show property lines, existing structures, proposed structures, setbacks, distance of all structures from property lines, overall dimensions of all structures and proposed work.
Include positions and distances to all wells and on lot septic systems.

This permit authorizes only the work shown on the attachments.

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BUILDER'S NAME:_____

DBA:_____

CONTRACTOR'S REGISTRATION NUMBER _____

ADDRESS:_____

CITY:_____STATE:_____ZIP:_____

PHONE:(_____)_____

WORKER'S COMPENSATION INFORMATION:

INSURER:_____ NAME OF POLICY HOLDER:_____

POLICY NUMBER:_____ EXPIRATION DATE:_____

CONTRACTOR'S FEDERAL OR STATE EMP. ID#:_____

PERMIT AGREEMENT

Building and zoning permits are valid for one year from the date of issue. Construction must be started within 180 days of issue. Permits may be extended only once by making application and paying an extension fee prior to expiration of the original permit.

Applicant/Owner is responsible for obtaining required highway occupancy permits from the PA Dept. of Transportation or Mount Pleasant Township as applicable.

I hereby agree that all applicable provisions of the Township Codes, the Energy Conservation Act 222 of 1990 and the most current version of the Uniform Construction Code in effect at the time this permit was issued shall be complied with, as well as the requirements of the Municipal Sewer and Water Authority whether specified or not.

In consideration of the issuance of a permit to the undersigned Applicant acknowledges that, in reviewing plans and specifications, in issuing permits, and in inspecting work of the Applicant, employees of The Municipality are only performing their duties to require compliance with the minimum requirements of the applicable Ordinances of The Municipality pursuant to the policy power of The Municipality and are not warranting to the Applicant or to any third party the quality or adequacy of the design, engineering or work of the Applicant. Applicant further acknowledges that it will not be possible for The Municipality to review every aspect of Applicant's design and engineering or to inspect every aspect of Applicant's work. Accordingly, neither The Municipality nor any of its elected or appointed officials or employees shall have any liability to the Applicant for defects or shortcomings in such design, engineering or work, even if it is alleged that such defects or shortcomings should have been discovered during The Municipality's review or inspection.

Furthermore, the Applicant agrees to defend, hold harmless and indemnify The Municipality, its elected and appointed officials and employees from and against any and all claims, demands, actions, and causes of action of any one or more third parties arising out of or relating to The Municipality's review or inspection of the Applicant's design, engineering work, or issuance of a permit or permits, or arising out of or relating to the design, engineering or work done by Applicant pursuant to such permit or permits. All references in this Agreement to Applicant's employees, agents, independent contractors, subcontractors or any other persons or entities performing work pursuant to the issuance of the building or grading permit by The Municipality.

I am fully aware of the U.S. Department of Labor, Occupation Safety and Health Administration (OSHA) standards and understand that I must comply with these standards for the duration of my construction project.
I certify that the information provided in this application package is true and correct.

_____ _____ _____

APPLICANT / AGENT SIGNATURE **PRINT NAME** **DATE**

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ZONING PERMIT #

ZONING PERMIT APPLICATION ☐ **APPROVED** ☐ **DENIED** _____

APPROVED BY:_____ DATE:_____

REASON(S) FOR DENIAL:_____

FORM DATE 1/27/2014