SANDY TOWNSHIP ZONING PERMIT APPLICATION

ALL OF THE BELOW INFORMATION MUST BE PROVIDED. FAILURE TO PROVIDE THE FOLLOWING INFORMATION MAY RESULT IN PERMIT DENIAL. PLEASE ANSWER ALL QUESTIONS OR CONTACT CODE ENFORCEMENT AT 814-371-4220 Ext. 211 OR EMAIL pgreen@sandytownship.net WITH ANY QUESTIONS.

□ Residential or □ Commercia	l Project Treasure L	ake Only : Section #: Lot #:	
Project Location:		Cost of Construction:	
Project Description:			
Building Dimensions:	В	uilding Height (to peak):	
Anticipated Start Date:	Fin	ish Date:	
Applicant:	Cor	ntractor:	
Address:	Add		
Phone #:	Pho	one #:	
Signature:	Sig	Signature:	
Date:	Dat	e:	
Type of Sewage	perty's current use: Yes No (Approval Attached) or N/A (Approval Attached) or N/A (Approval Attached) or N/A	Proposed use: Project Within a Floodplain? □ Yes □ No (Floodplain Survey required if yes) Wetlands Within Project Area? □ Yes □ No	
Stormwater Management	(Approval Attached) or N/A	(Wetland Delineation required if yes)	
	DEPARTMENT USE	ONLY:	
Property ID#:		Permit #:	
Front Yard Available:		Permitted:	
Side Yard Available:		Permitted:	
Rear Yard Available:		Permitted:	
Lot Coverage Available:		Maximum:	
Off Street Parking Available:		Required:	
	hat this application follows all releva ce and therefore eligible for a Zoning	ant ordinances of Sandy Township including the g Permit.	
Date Approved/Issued:		Zoning Officer:	
		Permit Fee:	