

City of Sharon Code and Zoning Department 155 W. Connelly Blvd., Sharon, PA. 16146 Tel. (724) 983-3201

ZONING PERMIT APPLICATION

1) PROJECT LOCATION:				
2) MAP & PARCEL NUMBER:				
3) OWNER INFORMATION:	4) <u>CONTRA</u>	4) CONTRACTOR INFORMATION:		
FIRST NAME MI LAST NAM	ME NAME OF CO	OMPANY Registration #		
STREET ADDRESS	CONTACT IN	NDIVIDUAL		
CITY, STATE & ZIP	ADDRESS			
TELEPHONE #	Contractor is	license to work in Sharon? Yes*		
	*If No, the contractor m	ust registered before beginning work.		
5) TYPE OF PERMIT	6) PROPOSED USE	7) CATEGORY		
New Building Addition Alteration Demolition Mobile Home Transfer Fence Temporary / Hardship Other:	Single-Family Duplex Multi-Family Barn Pool (Above/Inground)(C Porch / Deck (Circle 1) Shed / Greenhouse (Circle 1) Other:	Residential Commercial Industrial Institutional ircle 1) School Church le 1) Other:		
8) IS IT IN A FLOODPLAIN?(Yes or No) 9) MOBILE / MOI	OULAR SERIAL #		
10) PROVIDE A BRIEF DESCRIPTION	N OF PROJECT:			
11) BUILDING CHARACTERISTICS	12) CONS	STRUCTION COSTS		
Brick-Stone-Block	Estim	Estimated cost of construction:		
Wood Frame	\$	\$		
Structural Steel Reinforced Concrete	Will the	Will there be electric?		
13) NUMBER OF ROOMS (if applicable) 14) SEWAGE DISPOSAL (if applied	able) 15) WATER SUPPLY (if applicable		
Bedrooms	Public	Public		
Full Baths	Private	Private		
Half Baths	Sentic Permit #			

Gas Oil Electric Coal Other:		l Air Conditioning ors l Equipment	Off Stree Enclosed Outdoors	
19) BUILDING SETBACKS**		20) DIMENSIONS	6 (of structure to	be built)
From Road (Residential) From Left Side From Right Side From Rear From Right-of-way		sq. ft L sq. ft C sq. ft B	Garage (if unattac	garage if attached) hed)
**Building setback line: Imaginary line structure may extend nearer the lot line 21) ACREAGE TOTAL OR LOT	than the requir	ed front yard depth, step		
22) FOR DECKS/PORCHES ON	<i>ILY:</i> HEIGH	T FROM GROUND?		
23) DRIVEWAY PERMIT Private Lane State Road Public Twp. Road				
		TS THE INFORMAT ATE UNDER PENAL		INED IS
Signature of OWNER	Date	Signature of C	O-OWNER	Date
(Print)	-		(Print)	

The last two pages need to be filled out in order to best process the application.

No work shall start without the official zoning approval from the City of Sharon Zoning Office.

WRITTEN SUMMARY OF PROJECT
(Be detailed and specific of the scope and purpose of the project)

City of Sharon Code and Zoning Department Plot Plan (Required)



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REQUIRED INFORMATION:		
CHECK LIST		
Lot Shape		
Lot Dimensions	Construction Location:	
Building Location		
Driveway Location	Signature (Required):	
Distances to Property Lines	Date:	
Water Supply		
Sewage/Septic Location		
Road/Street Name		