APPLICATION FOR ZONING PERMIT
CARR0LL TOWNSHIP, YORK COUNTY
555 CHESTNUT GROVE ROAD, DILLSBURG, PA 17019
PHONE 717-432-4951 FAX 717-502-8807

Date_____ Phone Number_____

Property Located At_____

Owner's Name_____

Owner's Address_____

The undersigned applicant hereby applies for a permit to:

_____Erect a structure - explain briefly_____

_____Add to a structure - explain briefly_____

_____Alter a structure - explain briefly_____

_____Erect a sign - explain briefly_____

_____Change a use - explain briefly_____

$_____Estimated cost of proposed work.

Present use of property_____

Present Zoning_____

Submitted herewith is a scale drawing of the lot showing proposed work and/or existing structure. NOTE: This sketch is a MUST
Also submitted herewith is the application fee of $50.00

FAYE ROMBERGER, CARROLL TOWNSHIP ZONING OFFICER, MUST BE CONTACTED FOR A STAKE OUT INSPECTION OF THE BUILDING PROJECT AT 717-432-4951

Name of Contractor_____

Address of Contractor_____

The construction applied for shall be completed by_____
(Date)

_____
(Signature of Applicant)

_____ _____
(Signature of Zoning Officer) (Date)

Application Fee $_____Received by_____Date_____

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ATTACHMENT TO APPLICATION FOR ZONING PERMIT

APPLICATION FOR ZONING PERMIT. All applications for zoning permits shall be accompanied by plans in duplicate, drawn to scale, showing the actual shape and dimensions of the lot to be built upon; the exact size and location of any buildings existing on the lot; the lines within which the proposed building or structure shall be erected or altered; the existing and intended use of each building or part of a building; the number and size of any dwelling units within the building; and such other information as may be required on the permit application or otherwise necessary to determine compliance with this Ordinance and all other pertinent Ordinances. One (1) copy of such plans shall be returned to the owner when such plans shall be approved by the Zoning Officer.

SKETCH - BELOW