

**Zoning Permit Application
Carroll Township**

555 Chestnut Grove Road, Dillsburg, PA 17019
Ph: 717-432-4951 Fax: 717-502-8807



Zoning Permit # _____

Building Permit # _____

Property Location: _____

Subdivision: _____ Lot #: _____

Name of Owner: _____ Phone: _____

Address of Owner: _____

Name of Applicant: _____ Phone: _____

Address of Applicant: _____

Name of Contractor: _____ Phone: _____

Address of Contractor: _____

The Applicant is applying for a permit to:

- ___ Erect a Structure - Explain: _____
- ___ Add to a Structure - Explain: _____
- ___ Alter a Structure - Explain: _____
- ___ Erect a Sign - Explain: _____
- ___ Change a Use - Explain: _____

Estimated Cost: _____

Zoning District: _____

Note: A dimensional site plan MUST be submitted showing proposed work and all existing structures.
(Must include property lines, known easements, setbacks and amount of proposed impervious coverage)

Contact the Carroll Township Zoning Officer for a stakeout inspection of the building project at 717-432-4951

By signing this application, the applicant certifies that all information (including setback dimensions) is correct and the work will be completed in accordance with the "Approved" site plan and any additional requirements of the Township. The owner/applicant assume the responsibility of locating all property lines, setback lines, easements, right-of-way, floodplains, etc. Issuance of permit and approval of site plan shall not be construed as authority to violate, cancel, or set aside any provisions of the Codes or Ordinances of the Township or any other governing body. The applicant certifies that they understand the applicable Codes, Ordinances, and Regulations.

Signature of Applicant: _____ Date: _____

Signature of Owner: _____ Date: _____

Township use Only

Permit Fee: \$50.00 Received By: _____ Date: _____

Signature of Zoning Officer

Action

Date