

BOROUGH OF ST. CLAIR

APPLICATION FOR ZONING PERMIT

Application is hereby made for a permit to erect, alter, or demolish a structure which shall be located as shown on diagram or to use the premises for the purpose described herewith. The information which follows, together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without the written approval of the Zoning Officer or other authorized Borough official, shall constitute sufficient grounds for the revocation of this permit.

Section A. Location and Ownership of Property

- 1. PROPERTY ADDRESS _____
- 2. DEED OWNER AND ADDRESS _____
- 3. FORMER DEED OWNER, IF KNOWN _____
- 4. TAX MAP PARCEL NO. _____
- 5. ZONING DISTRICT _____

Section B. Applicant

- 1. NAME OF APPLICANT* _____ PHONE _____
- 2. ADDRESS OF APPLICANT _____

*If Applicant is other than the Owner or Lessee, this application must be accompanied by a written authorization from the Owner or Lessee authorizing the work and designating the agent.

Section C. Present Use of Property

- Vacant Single Family Dwelling Multi-Family Dwelling Commercial Industrial Agricultural Mining
- Other _____

Section D. Proposed Work

- | TYPE OF WORK | TYPE OF STRUCTURE | USE OF BUILDING/STRUCTURE |
|-------------------------------------|---|--|
| <input type="checkbox"/> New | <input type="checkbox"/> Single Family Dwelling/Mobile Home | <input type="checkbox"/> Residential |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Multi-Family Dwelling: No. of Units _____ | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Alteration | <input type="checkbox"/> Swimming Pool: Size _____ Gals _____ | <input type="checkbox"/> Industrial |
| <input type="checkbox"/> Repairs | <input type="checkbox"/> Garage: <input type="checkbox"/> Private <input type="checkbox"/> Commercial | <input type="checkbox"/> Agricultural |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Sign | <input type="checkbox"/> Mining |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Fence | <input type="checkbox"/> Motel/Hotel |
| | <input type="checkbox"/> Enclosed Porch or Patio | <input type="checkbox"/> Professional Office _____ |
| | <input type="checkbox"/> Driveway: Width _____ | <input type="checkbox"/> Educational/Religious |
| | <input type="checkbox"/> Drainage | <input type="checkbox"/> Amusement/Recreational |
| | <input type="checkbox"/> Sewage | <input type="checkbox"/> Restaurant/Bank |
| | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Service Station/Repair Garage |
| | | <input type="checkbox"/> Hospital/Institution |
| | | <input type="checkbox"/> Other _____ |

Remarks: _____

Section E. Location Diagram Must Be Complete or Permit Will Not Be Issued

Diagram is: Attached (Non-Residential) Drawn Below (Residential ONLY)

Diagram, drawn to scale, is to show:

1. All lot and building setback lines and dimensions.
2. All streets, roads, and alleys bounding property.
3. All existing buildings, fences, signs, and structures.
4. Locations and dimensions of all PROPOSED structures and additions.
5. Distances from proposed structures to lot lines and to other existing structures.
6. If property has been surveyed, state name of surveyor: _____
7. Describe specific PROPOSED use or uses of structure(s).
8. All existing and proposed utilities and their respective easements, if applicable (Non-Residential Only)
9. All access easements which may exist through the property.
10. The following Zoning Data (if not applicable, fill in "N/A"):

	<u>Maximum Permitted</u>	<u>Minimum Required</u>	<u>Actual Proposed</u>
Zoning District	_____	_____	_____
Building Height (ft.)	_____	_____	_____
Lot Coverage (percent)	_____	_____	_____
Impervious Coverage (percent)	_____	_____	_____
Lot Size (sq. ft.)	_____	_____	_____
Lot Width			
At Street Line (ft.)	_____	_____	_____
At Building Setback Line (ft.)	_____	_____	_____
Building Setback			
Front (ft.)	_____	_____	_____
Rear (ft.)	_____	_____	_____
Side (ft.)	_____	_____	_____
Improvements Setback (ft.)	_____	_____	_____
Distance between highway access pts.	_____	_____	_____
Side Yard			
Total (ft.)	_____	_____	_____
One Side (ft.)	_____	_____	_____
Rear Yard (ft.)	_____	_____	_____
Parking Requirements	_____	_____	_____

Section F. Notes

For ALL New Building, Construction, Alteration & Demolition

- a. The permittee shall be responsible for establishing the property lines between his/her property and that of any adjoiner prior to constructing a fence/wall between the properties.
- b. To drain swimming pool water, it should be pumped through existing filtering system into house drainage system. The St. Clair Sewer Authority must be notified of such activity at least one (1) week in advance.
- c. All proposed structures which will provide water service and/or sewerage shall utilize public water supply and/or public sanitary sewer system or approved on-lot system per Borough Ordinance.
- d. Development within floodplains is subject to the requirements of Borough Ordinance No. 263 regulating areas subject to flooding.
- e. Applicant intending to construct adjoining public roadways with the intention of placing an access driveway from their property MUST obtain a highway occupancy permit from the PA Department of Transportation or approval from the St. Clair Planning Commission.
- f. Applicant shall be responsible to obtain approval from the Schuylkill Conservation District when applicable to the project.
- g. THIS PERMIT, WHEN APPROVED, SHALL BE VALID FOR A PERIOD OF TWO (2) YEARS FROM DATE OF ISSUANCE, UNLESS A TIME EXTENSION IS GRANTED IN WRITING BY THE ZONING OFFICER OR OTHER AUTHORIZED BOROUGH OFFICIAL.

Section G. Certification

"I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I further certify that I am authorized by the owner to make the foregoing application and that, before I accept any permit for which this application is made, the owner shall be made aware of all the conditions of the permit. I understand that if I knowingly make any false statement herein I am subject to such penalties as may be prescribed by law or ordinance."

- 1. NAME OF APPLICANT (Print or Type) _____
- 2. APPLICANT'S SIGNATURE _____ DATE _____

This permit applies to Borough of St. Clair Zoning Permit Ordinance Only and SHALL NOT relieve the applicant from obtaining such other permits as may be required by law.

FOR BOROUGH USE ONLY

- 1. DATE APPLICATION RECEIVED: _____
 - 2. ASSESSMENT MAP NO. _____ PERMIT NO. _____ FEE \$ _____
 - 3. SITE LOCATION _____ ZONING DISTRICT _____
 - Approval - Denial - Date of Action Taken
 - 4. APPLICATION APPROVED: YES NO DATE _____
(Borough of St. Clair Zoning Officer)
 - 5. REASON FOR DENIAL: _____
 - 6. ZONING HEARING BOARD'S DECISION: GRANTED DENIED DATE _____
- REMARKS: _____