ELIZABETH TOWNSHIP ZONING/BUILDING PERMIT APPLICATION

This guideline was prepared to assist you in planning your project. By properly submitting the necessary information, the Zoning Officer will be able to swiftly process your Zoning Permit application. Your project will be evaluated to confirm compliance with the Elizabeth Township Zoning Ordinance.

If your project is not in compliance with the Zoning Ordinance (permitted use, setbacks from property lines, lot coverage allowance, etc.), you may need to obtain a variance or special exception from the Elizabeth Township Zoning Hearing Board prior to obtaining a Zoning Permit.

Along with this completed application, a plot plan and any supplemental information must be submitted before this application will be reviewed. The Zoning Permit fee must be submitted at the time of application.

Questions regarding this procedure should be directed to Barry R. Wagner, Zoning Officer at (717) 625-0444. The Zoning Officer is also available at the Township office on Wednesday evenings between 6 p.m. and 8 p.m.

ZONING PERMIT APPLICATION:

A. B.	***************************************	Did you complete the application with all information requested?
C.		Did you provide the full name and address of the applicant and the landowner, if different, on the
D.	<u> </u>	application? Did you include a sufficiently clear and detailed plan showing lot area and setback footages from property lines of all structures on the property?
E.		
F.		
G.	P-700-50	
H.		If applicable to your project, did you complete the Application for Building/Construction Permit as required under the Uniform Construction Code.
REQ PER		FOR NEW RESIDENTIAL CONSTRUCTION PRIOR TO THE ISSUANCE OF A ZONING
A.		Sewage permit.
B.		Valid driveway permit (State or Township).
C.		Storm water management permit.
D.		Water feasibility permit.
E.		Application for Building/Construction Permit as required under the Uniform Construction Code, if applicable to the project.
		erations, and accessory structures <u>may</u> also require a Storm Water Management Permit and/or truction Permit under the Uniform Construction Code.
REQ	UIRED F	FOR NON-RESIDENTIAL BUILDINGS/USES <u>PRIOR</u> TO ISSUANCE OF A ZONING PERMIT:
A.	****	Items above, if applicable to the project.
В.		Approval and recording of a land development plan or a receipt of a waiver of the land development plan processing procedure.
C.		Storm Water Management Plan approval or receipt of a waiver thereof.
D.	-	Sedimentation and Erosion Control Plan, if grading or excavation is proposed, or proof that a plan is not required.
E.		Application for Building/Construction Permit as required by the Uniform Construction Code, if applicable to the project.

PERMIT NO.	
PERMIT NO.	

ELIZABETH TOWNSHIP 423 South View Drive Lititz, PA 17543

Telephone: (717) 626-4302

Fax: (717) 626-0102

APPLICATION FOR ZONING PERMIT

Name:	
Address:	Phone:
Name, Address, and Phone of Owner, if differen	nt than Applicant:
If the Applicant is not the Owner of the prop	perty, identify the relationship of the Applicant to the Owner
Federal or State Employer Identification Number	of Contractor:
Is Applicant required to carry Workers' Compens	sation Insurance? Yes No.
Workers' Compensation Insurance carrier:	
	Compensation Carrier naming Elizabeth Township as a otified of the expiration or cancellation of the policy.
If Applicant is not the Owner of the property, have Yes No.	e you been authorized to make this application?
Location of property:	
Zoning District Classification:	
Present Use of Property: the property considered a historic site? If yes, atta	NOTE: Is any building on ach a description of the historic nature of the building(s).
	ructures to be erected in sufficient detail to determine compliance Zoning Ordinance. Include the size and type of construction and
Duoma and sound anth a strat. Frants	
	r: Sides: Lot Coverage:%
Width of structure: Depth:	
Type of Construction: New Construction ()	Addition () Alteration ()

Structure will contain square feet of usable floor area.
Proposed number of off-street parking spaces, if applicable: Proposed number of off-street loading spaces, if applicable:
The complete cost of the project for which this permit is requested is \$
Estimated date of project completion:
The lines of the boundary street and the property lines have been accurately located and staked on the ground by:
If required, has the Elizabeth Township Zoning Hearing Board issued a decision permitting the requested use or the erection of the structure? Yes No If yes, list the Zoning Hearing Board Case Number, and the Zoning Hearing Board's date of the decision
If required, has a sewage permit been obtained? Yes No If yes, the sewage permit number is
If required, has a driveway permit been obtained? Yes No If yes, the driveway permit number is
If required, has a storm water management permit been obtained? Yes No If yes, the storm water management permit number is
If required, has a well permit been obtained? Yes No If yes, the well permit number is

A PLOT PLAN SHOWING EXISTING AND PLANNED STRUCTURES, EXISTING AND PLANNED DRIVEWAYS AND PARKING AREAS, INTERIOR AND EXTERIOR STORAGE AREAS, AND ALL SIGNIFICANT FEATURES SUCH AS FLOODPLAINS, WETLANDS, EASEMENTS, AND DRAINAGEWAYS SHALL BE SUBMITTED WITH THIS APPLICATION.

UNTIL SUCH A PLAN IS SUBMITTED, THIS APPLICATION SHALL NOT BE CONSIDERED COMPLETE AND SHALL NOT BE PROCESSED.

If possible, use the reverse side of this application to indicate the size of the lot, the location of structures on the lot, dimensions of structures, and all property setbacks.

I am aware that I cannot occupy the Property for the purpose of conducting the use set forth herein and cannot commence excavation or construction until a Zoning Permit has been issued by Elizabeth Township. I am aware that I cannot change the use of the Property herein until I have applied for and receive a Zoning Permit for such proposed use. By signing this application, I certify that all facts in the Application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of Elizabeth Township, and I understand that any false statements made herein are being made subject to the penalties of 18 PA C.S. 4904 relating to unsworn falsification to authorities.

The issuance of a Zoning Permit is based upon the facts stated and representations made in this Application. A Zoning Permit may be revoked if the use and/or structures for which it has been issued violates any applicable Township, County, State or Federal law or regulation, including, but not limited to the Elizabeth Township Zoning Ordinance. This Permit may also be revoked if it has been issued in error or if the issuance was based upon any misrepresentations or errors contained in the Application or otherwise made by the Applicant.

The permit holder is advised that persons aggrieved by a use or development permitted on the land of another may file an appeal with the Elizabeth Township Zoning Hearing Board seeking revocation of any permits issued or approvals granted within thirty (30) days from the date of issuance of such permit, or at a later date if such aggrieved person alleges and proves that he had no notice, knowledge or reason to believe that such approval had been given.

Notice is hereby given that if the property described in this permit will require access to a highway under the jurisdiction of the Pennsylvania Department of Transportation, a Highway Occupancy Permit is required pursuant to Section 420 of the Act of June 1, 1945, P.L. 1242, No. 428, known as the State Highway Law, before driveway access to a state highway is permitted. Access to a state highway shall be only as authorized by the Highway Occupancy Permit issued by the Pennsylvania Department of Transportation.

The Zoning Officer does not guarantee or give oppinions relating to the proposed construction under the Permit and does not warrant compliance with applicable laws or regulations by the issuance of a Zoning Permit. The Applicant bears all responsibility for insuring compliance with all applicable laws and regulations, including, but not limited to compliance with the Elizabeth Township Zoning Ordinance, the Elizabeth Township Storm Water Management Ordinance, the Lancaster County Subdivision and Land Development Ordinance, and Act 222, the Energy Conservation Act. The Applicant acknowledges that he has not relied upon any oral or written statements of officials of Elizabeth Township in making this Application.

I acknowledge that the holder of a Zoning Permit is responsible to insure compliance with all applicable Township ordinances during and at the completion of work authorized by the Zoning Permit. I acknowledge that the Township requires that a final inspection be performed by the Zoning Officer and that the Zoning Officer issue a Certificate of Use and Occupancy before the structure which is authorized by this permit may be occupied. It is my responsibility to insure that this inspection is scheduled and the Certificate of Use and Occupancy of this structure prior to the issuance of the Certificate of Use and Occupancy, I will have committed a violation of the Zoning Ordinance and will be subject to the penalties and remedies in the Zoning Ordinance. I also acknowledge that, if the structure is occupied prior to the final inspection, work may have to be removed and re-executed in order that it may be adequately inspected. If the Township is required to perform an inspection after the structure is occupied, intending to be legally bound herein, I agree to pay the fee established by the Township for delinquent inspections.

Nothing contained in this application shall be construed to relieve or limit the obligations of the Applicant to comply with all provisions of the Zoning Ordinance or to waive violations of the Zoning Ordinance or any other Township ordinances or to estop the Township from enforcing Township ordinances, including but not limited to the Zoning Ordinance.

Questions regarding this permit application and the Elizabeth Township Zoning Ordinance may be directed to Barry R. Wagner, Zoning Officer, at (717) 625-0444.

I hereby authorize the designated Elizabeth Township official to investigate, inspect, and examine the property
set forth herein, including land and structures, to determine compliance with the Elizabeth Township Zoning
Ordinance and to determine the accuracy of the statements contained herein.

Date:	Signature:			
	Print Name	•		

THIS PAGE IS FOR TOWNSHIP USE					
Data Pagaiyadı			:		
Zoning Permit Approved:		Zoning Permit Denied:			
	Ву:	Zoning Officer			
Reason for Denial:					
Permit Fee:					
Date Paid: Check No.:		 -			

Resolution 9 - 2013 (effective 10-14-13)

PERMIT FEE SCHEDULE OF COSTS

Zoning Permit Fees

Minim	num Processing Fee for any Zoning Permit Application	n\$30.00
<u>Plus</u> :	Above-ground pools	\$20.00
	Above-ground pools w. decking	\$25.00
	In-ground pools	\$100.00
	Deck & Patios, on-grade	\$25.00
	Sheds & accessory structures 150 s.f 500 s.f	\$30.00
	(under 150 s.f no additional fee)	
	Permanent signs & billboards	\$50.00
	Up to 4 s.f no additional fee	50.00
	New Construction & Structural Addit (including accessory structures over 500	
Minimi	um Processing Fee for any Zoning Permit Application	a\$30.00
<u>Plus</u> :	\$0.50 per square foot of usable space	
	(excluding single-family dwellings) um Processing Fee for any Permit Application \$.15 per sq. ft. of usable space	\$30.00
	Remodeling	
Minimu	um Processing Fee for any Zoning Permit Application	\$30.00
<u>Plus:</u>	Dollar Value: Under \$1,000.00 - no additional for \$1,000.00 and above - \$5.00 per to	
	Other Permits	
Sewage	Permits - see Sewage Enforcement Officer for specific	ic costs
Drivewa	ray Permit Township Road State Road - contact PaDOT @ (717) 299-7621	\$30.00
*** 1	9	# 50.00
Highwa	ay Occupancy Permit	\$30.00
Water F	Feasibility Study	\$150.00
Stormw	vater Management Permits	
	Minor Plan	\$500.00
	Major Plan	\$1,000.00
	(Note: additional inspection costs may appl	y)

Application for Building Permit and Plans Examination

Elizabeth Township, 423 South View Drive, Lititz, PA 17543, Phone 717-626-4302, Fax 717-626-0102

NOTE: The Elizabeth Township Board of Supervisors has appointed two agencies to administer and enforce the Uniform Construction Code. It is the permit applicant's responsibility to select and identify one of the agencies below that would perform the plan review and the required inspections during the construction process. Three (3) sets of plans are required for all submissions. Additional information is provided on the last sheet of this application.

SELECT ONE:					
Associated Building Ins Lincoln Office Building 1248 West Main Street Ephrata, PA 17522 Telephone: (717) 733	t, Suite 23		4340 Or Ephrata	dministrators, Inc. regon Pike , PA 17522 ne: (717) 859-3350	
Office Use Only		Residential F	Permit	Comm	ercial Permit
Permit #	***************************************				
Location of Project					
Address _					
Intended Use					
Owner of Record					
Name of Owner _					distribution and the control of the
Address of Owner _					
City		State2	Zip Code	Phone No.	
Project Information					
□ New Building □ Fo	□ Addition undation Only □ C	□ Alteration hange of Use	□ Repair □ Plumbing	□ Demolition □ Electrical □	□ Relocation Mechanical
Brief Description of P	roject				-
Cost of Construction			Square	e Footage	
<u> </u>					
and PA Act 45 (Uniform. Con assumes the responsibility o	struction Code) and any add f locating all property lines, s strued as authority to violate	litional approved buildi setback lines, easemer , cancel or set aside a	ng code requirement nts, rights-of-way, floo ny provisions of the	s adopted by the Municipa od areas, etc. Issuance of codes or ordinances of th	e 'approved" construction docum ality. The property owner and appli a permit and approval of constru- ie Municipality or any other gover
Applicant for a permit shall to connection with the propose		ssee of the building or	structure, or agent of	of either or by the registe	red design professional employe
enforce the provisions of the ees, which may be require	he code(s) applicable to si d during construction, the	ich permit. I understa at were not outlined d	ind that I am respor uring the initial per	nsible for any plan revie mit approval. I understa	permit at any reasonable hot w fees or any additional inspec and that all fees must be paid in posed projects that I choose no
App SIGNATURE REQUIRED	olicant Signature				
qqA	licant Printed Name				Date

Contractor Information:

General Contractor			
General Contractor			
Address			
Phone	Fax	Mobile/Cell	
Framing Contractor:			
1			
Address			
Phone	Fax	Mobile/Cell	
Electrical Contractor:			VARIANTE ANNA LEGIS
Address			
Phone	Fax	Mobile/Cell	ATTITUDE OF THE PROPERTY OF TH
Plumbing Contractor:			
Plumbing Contractor			***************************************
Address			
Phone	Fax	Mobile/Cell	
Heating Contractor:			
Address			
Phone	Fax	Mobile/Cell	
Foundation Contractor:			
Address			2-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0-100-0
Dhone	For	Mahila/Call	

901(B) ELECTRICAL EXEMPTION AFFIDAVIT

Applicant:			
Address:			
Religious Sect:			
I,		do here	eby affirm that I am a member
of the		religious sect w	which has established tenets or
teachings which conflict w	vith the electrical provi	ision of the Uniform C	onstruction Code, and that as
a member of the		, I ad	here to the established tenets
or teachings. I further affi	rm that the residential	structure on the above	mentioned property will be
used solely as a residence	for myself and my hou	sehold. I understand t	hat in receiving an exemption
for a dwelling unit under S	Section 901(B) of the A	Act and subsequently se	ell or lease the dwelling unit, I
shall bring the dwelling un	it into compliance wit	h the provisions of the	Uniforms Construction Code
for which this exemption is	s granted.		
	Signature of Appli	cant:	
Subscribed and sworn to b	pefore me this	day of	, 2
	Signature o	f Notary:	
	(Notary Sea	al)	
Code Administrator Appro	val:		
Date:	Signed:		