

**WAMPUM BOROUGH
INSTRUCTIONS
ZONING PERMITS**

1. When an application is completed, you must return the application to the Township Secretary at the Township Building along with payment.

2. The following will be required by the Officer:

- a. Complete application
- b. Drawing showing structure location, with all distances to property lines, right of ways, other buildings and etc.
- c. Information including name and proof of ownership of property, tax ID number
- d. Proof of valid sanitary sewerage connection permit or on-lot sewerage permit
- e. Costs: (\$0.10) per square foot of floor space plus twenty dollars (\$20.00).
- f. Driveway permit when necessary

3. Permit Issuance

Will be made within five (5) working days of receipt of completed application. Permit will be issued or denied in writing to applicant. Area to be used for construction must be marked in some way.

4. Final Site Inspection

Inspection when construction is completed. ~~Township to be notified when construction is completed.~~ The Officer shall conduct a final inspection within five (5) working days after notification of completion.

**WAMPUM BOROUGH ZONING ORDINANCE
APPLICATION FOR BUILDING PERMIT**

Permit No: _____

Date Issued: _____

Name of Applicant Address Phone Number

Name of Contractor Address Phone and PA State Registration
Number

1. PURPOSE OF PERMIT New Construction ___ Addition ___ Change of Use ___ Sign(s) ___
Fence ___ Other(Specify) _____

2. LOCATION: House Number and Name of Street _____
Name of Subdivision _____ Lot Number _____
Tax Parcel Number _____

3. PROPERTY SIZE: Width _____ ft. Length _____ ft. Lot Area _____

4. YARD DISTANCES (from building to property lines)
Front _____ ft. Rear _____ ft. Sides _____ ft. and _____ ft.

5. DIMENSIONS OF PROPOSED BUILDINGS: Width _____ ft. Depth _____ ft/
Area _____ sq. ft.

6. INTENDED USE OF BUILDING: ___ Residence ___ Duplex ___ Apartment
___ Garage ___ Commercial (State Type) ___ Number of Vehicles ___ Other (Specify)

7. ZONING DISTRICT _____

8. ESTIMATED STARTING AND COMPLETION DATES:
Starting Date _____ Date of Completion _____

9. COST OF NEW BUILDING OR IMPROVEMENTS: \$ _____

10. FLOOD PLAIN STATUS: ___ Yes ___ No Map Number: _____

I, the undersigned do hereby certify that the above information and the accompanying plans and plot are true and correct.

Date

Signature of Applicant

Fee Paid \$ _____

Application and Plans {} Approved {} Disapproved

Signature of Zoning Officer: _____