

TOWAMENCIN TOWNSHIP

for questions permits@towamencin.org

(no permit applications via email)

ZONING REVIEW APPLICATION

OWNER: _____

PROPERTY ADDRESS: _____ CITY: _____

PHONE NUMBER: _____ E-MAIL: _____

TYPE OF ZONING REVIEW REQUESTED:

____ FENCE ____ PATIO ____ RETAINING WALL ____ SHED ____ OTHER (specify)

PROVIDE DESCRIPTION OF WORK: (ie: spec. sheet, size, height, construction and assembly details, etc.)

TYPE OF WORK IS: ____ New ____ Replacement ESTIMATED COST: \$ _____

CONTRACTOR NAME: _____ PHONE #: _____

***PLEASE PROVIDE AN UPDATED CERTIFICATE OF INSURANCE**

CONTRACTOR ADDRESS: _____

E-MAIL ADDRESS: _____ STATE REGISTRATION #: _____

SPECIFIC REQUIREMENTS:

Provide PLOT PLAN OR DRAWING with the following minimum information:

- Size and dimensions of the lot
- Location and size of all existing buildings or improvements on the lot
- Show building setback lines on the plan and setbacks to the property lines
- Show any easement, basin or drainage swales that are located on the lot
- Show placement of all proposed improvements

Please call 24 hours in advance to schedule a final inspection.

NOTE: TOWNSHIP ORDINANCE DOES NOT PERMIT THE PLACEMENT OF ANY FENCE OR STRUCTURE ON AN EASEMENT OR RIGHT-OF-WAY WITHOUT A WAIVER OF DAMAGES

***The owner or applicant is responsible for the accuracy of all property lines, easements and other physical attributes that are depicted on the plot plan and related information. Towamencin Township reserves the right to revoke any permit issued based on incorrect information.**

Deposit of Check Representing the Fee for this application does not Constitute Approval of or Granting of same by Towamencin Township. I hereby certify that the owner of record authorizes the proposed work and that I have been authorized by the owner to make this application as his agent and we agree to conform to all applicable laws of Towamencin Township.

SIGNATURE OF APPLICANT: _____ DATE: _____

APPROVAL: _____ DATE: _____

FEE PAID: \$ _____ PERMIT#: _____