TOWAMENCIN TOWNSHIP

for questions permits@towamencin.org (no permit applications via email) ZONING REVIEW APPLICATION

	-
OWNER:	
APPLICANT:	
PROPERTY ADDRESS:CITY:	
PHONE NUMBER:E-MAIL	.:
TYPE OF ZONING REVIEW REQUESTED:	
□ FENCE □ PATIO □ RETAINING WALL □ SHED □ OTHER (specify)	
PROVIDE DESCRIPTION OF WORK: (ie: size, height, construction and	assembly details, etc.)
TYPE OF WORK IS: Image: New Image: Replacement Est	imated Cost:
SPECIFIC REQUIREMENTS:	
 Provide plot plan with the following minimum information: Size and dimensions of the lot Location and size of all existing buildings or improvements on the lo Show building setback lines on the plan Show any easement, basin or drainage swales that are located on the Show placement of all proposed improvements 	
Please call 24 hours in advance to schedule a final inspection.	
<i>NOTE: TOWNSHIP ORDINANCE DOES NOT PERMIT THE PLACEMENT OF ANY FENCE OR STRUCTURE ON AN EASEMENT OR THE RIGHT-OF-WAY</i>	
*The owner or applicant is responsible for the accuracy of all property liphysical attributes that are depicted on the plot plan and related information Township reserves the right to revoke any permit issued based on incorre	ation. Towamencin
Deposit of Check Representing the Fee for this application does not Constitute Approval of or Township. I hereby certify that the owner of record authorizes the proposed work and that I ha make this application as his agent and we agree to conform to all applicable laws of Towamen	we been authorized by the owner to
SIGNATURE OF APPLICANT:	DATE:
APPROVAL:	DATE:
FEE PAID: \$	