

JACKSON TOWNSHIP PROPOSED USE PERMIT APPLICATION

APPLICATION DATE _____

APPLICATION NO. _____

ZONE: (CHECK APPROPRIATE BOXES)

- | | | |
|---|---|--|
| <input type="checkbox"/> AGRICULTURAL PRESERVATION | <input type="checkbox"/> VILLAGE | <input type="checkbox"/> GENERAL FLOOD PLAIN |
| <input type="checkbox"/> RURAL CONSERVATION | <input type="checkbox"/> COMMERCIAL | <input type="checkbox"/> UNDERGROUND MINING |
| <input type="checkbox"/> LOW DENSITY RESIDENTIAL (R-1) | <input type="checkbox"/> INDUSTRIAL | <input type="checkbox"/> AIRPORT SAFETY - 1 |
| <input type="checkbox"/> MEDIUM DENSITY RESIDENTIAL (R-2) | <input type="checkbox"/> FLOODWAY OVERLAY | <input type="checkbox"/> AIRPORT SAFETY - 2 |
| <input type="checkbox"/> HIGH DENSITY RESIDENTIAL (R-3) | <input type="checkbox"/> FLOOD FRINGE | <input type="checkbox"/> AIRPORT SAFETY - 3 |

PROPERTY INFORMATION:

TAX MAP _____ PARCEL NO. _____

SITE ADDRESS: _____

OWNER INFORMATION:

NAME: _____

ADDRESS: _____

PHONE# _____

HEREBY MAKES APPLICATION FOR A PERMIT TO **ERECT, ENLARGE, REPAIR, ALTER, REMOVE OR DEMOLISH** USE OF A STRUCTURE/LOT ON ABOVE MENTIONED PROPERTY:

PRESENT USE: _____ PROPOSED USE: _____

WRITTEN DESCRIPTION OF WORK PROPOSED: _____

CONTRACTOR: _____

PROOF OF WORKER'S COMPENSATION: YES NO

ESTIMATED COST OF CONSTRUCTION: _____

ESTIMATED START DATE _____ ESTIMATED COMPLETION DATE _____

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY, OR THAT THE PROPOSED WORK IS AUTHORIZED BY THE OWNER OF RECORD AND THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO MAKE THIS APPLICATION AS HIS AUTHORIZED AGENT AND I UNDERSTAND AND ASSUME RESPONSIBILITY FOR THE ESTABLISHMENT OF OFFICIAL PROPERTY LINES FOR REQUIRED SETBACKS PRIOR TO THE START OF CONSTRUCTION, AND AGREE TO CONFORM TO ALL APPLICABLE LAWS OF THIS JURISDICTION. I FURTHER CERTIFY THAT THIS INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

SIGNATURE OF APPLICANT: _____ **DATE:** _____

(FOR TOWNSHIP USE ONLY)	
_____ NO OTHER PERMITS REQUIRED	PLOT PLAN ATTACHED: <input type="checkbox"/> YES <input type="checkbox"/> NO
OTHER PERMITS, REVIEWS, APPROVALS (AS REQUIRED)	
_____ STWTR MANAGEMENT PERMIT: _____ DIA _____ EQUIVALENT DIA _____ PERMIT NO. _____	
_____ PUBLIC SEWER CONNECTION PERMIT NO. _____	ISSUED ON _____
_____ ON-LOT SEPTIC SYSTEM	
_____ WELL PERMIT APPLICATION	
_____ PUBLIC WATER PERMIT NO. _____	ISSUED ON _____
_____ WELL COMPLIANCE PERMIT ISSUED	
_____ PENNDOT HIGHWAY OCCUPANCY PERMIT NO. _____	ISSUED ON _____
_____ TOWNSHIP DRIVEWAY PERMIT	
_____ BUILDING PERMIT APPLICATION	
_____ OCCUPANCY/USE PERMIT	
_____ OTHER _____	

DATE PROPOSED USE PERMIT APPROVED: _____ FEE PAID: _____ APPROVED BY: _____

Site Plan: