

LEHIGHTON BOROUGH

ZONING PERMIT APPLICATION PACKET

Submission Checklist

- Applicable Fees Payable to Lehighton Borough
- Application completed in ink and signed by **applicant and property owner** if the applicant is not the property owner or provide written authorization from the owner to act as their agent.
- Completed plot plan with all required information attached. (Please refer to sample provided)
- Building Plans, as applicable. Include a floor plan and elevation plan for all new construction, including additions and decks.
- Ground Coverage Percentage for new primary structures and/or additions to primary structures (impervious coverage divided by lot area), if applicable
- Contractor Certificate of Insurance naming LEHIGHTON BOROUGH as certificate holder
- Height and size of structure specified on application where indicated.
- Parcel ID number and property address
- Contact person and phone number
- Copy of recorded deed (if required)
- Copy of Septic Permit if required)
- Copy of Water Supply Approval/Permit (if required)
- Copy of Driveway Permit (if required)
- Highway Occupancy Permit (if required)
- County Conservation District Approval (if required)
- Copy of Storm Water Approval/Permit (if required)
- Copy of Elevation Certificate (if required)
- All Property lines and proposed location of structure(s) must be marked on the site prior to submitting the application.

**Lehighton Borough Zoning Officer
1 Constitution Avenue
Lehighton, PA 18235
610- 377-4002**

If you are erecting a new structure, creating a new use for the property, changing the use of the property or creating a new point of access to your property, you will need to secure approval for access into the adjoining road or street.

- If the road is a state highway, you will need to secure approval of a highway occupancy permit from PennDOT.
- If the road is a borough road, you will need to secure approval of a driveway permit from Lehighon Borough.

YOUR ZONING PERMIT CANNOT BE PROCESSED WITHOUT IT.

If you are grading/excavating or filling a site, provide the following information:

Area of:

Excavation (sq. ft.) _____

Fill (sq. ft.) _____

Type of Fill Material _____

Depth at deepest point of either fill or excavation (ft.) _____

Proposed Times of Operation (day, start time, finish time) _____

IF YOU ARE PROPOSING AN EARTH DISTURBANCE ACTIVITY THAT INVOLVES ONE (1) ACRE OR MORE, AN EROSION AND CONTROL PLAN WILL BE REQUIRED FOR THE PROJECT THAT WILL NEED TO BE REVIEWED AND DEEMED ADEQUATE BY THE CARBON COUNTY CONSERVATION DISTRICT (CCCD). YOU SHOULD CONTACT THE CCCD AT 610-377-4894 PRIOR TO COMMENCING THE EARTH DISTURBANCE ACTIVITY.

#1-INITIAL _____ OVER ONE (1) ACRE OF EARTH DISTURBANCE.

#2-INITIAL _____ UNDER ONE (1) ACRE OF EARTH DISTURBANCE.

IF #1 IS INITIALED NO BUILDING OR ZONING APPLICATION WILL BE ACCEPTED BY LEHIGHTON BOROUGH WITHOUT PROPER DOCUMENTATION.

The payment for the Zoning Application is a separate payment from the Building Permit.

Any additional zoning fees due are payable to LEHIGHTON BOROUGH upon issuance of permit.

Should you have any questions please call 610-377-4002

THE OWNER/APPLICANT IS RESPONSIBLE TO OBTAIN ALL NECESSARY APPROVALS REQUIRED BY THE DEVELOPMENT IN WHICH THE PROPERTY IS LOCATED.

Applications must be completed in ink. Return the original completed application and application fee along with all applicable documents to:

**Lehighon Borough Zoning Officer
1 Constitution Avenue
Lehighon, PA 18235
610- 377-4002**



Code Services

**** OFFICE USE ONLY ****

Date Received: _____
Zoning District: _____
Tax Parcel No.: _____
Zoning Permit No.: _____

APPLICATION FOR ZONING PERMIT

Application is hereby made for a permit in conformity with requirements of the Pennsylvania Municipalities Planning Code, Current Local Zoning Ordinance and any amendments thereto for the following described work:

I. PROPERTY INFORMATION

Residential Non-Residential

Municipality: Lehighton Development: Lot: Section:

Proposed Work Site Address: Tax Parcel ID:
(Acres or Sq.ft.)

Lot Width: Lot Depth: Lot Size:

Property within Floodplain Yes No If Yes, Market Value of Property:

Do you have an elevation certificate Yes No If Yes, please attach a copy with submission

Property located in Historic District Yes No If Yes, also complete the Application for COA

II. CONTACT INFORMATION

Applicant: email:

Mailing Address: City: State: Zip:

Phone: Phone: Fax:

(If different than Applicant)

Property Owner: email:

Mailing Address: City: State: Zip:

Phone: Phone: Fax:

Contractor: email:

Mailing Address: City: State: Zip:

Phone: Phone: Fax:

III. CONSTRUCTION

Erect a Structure Principal Accessory **Size** (length, width and height) i.e. 20' L, 15' W, 12' H: _____

Add to a Structure Principal Accessory **Size** (length, width and height) i.e. 20' L, 15' W, 12' H: _____

Change of Use Existing: _____ Proposed: _____

Erect a Fence Height: _____ (feet) Install a Swimming Pool In-ground Above-ground

Erect a Sign (Provide sign proof along with plot plan) Sign Copy Change (Provide sign proof)

Type: Wall Mounted Ground Roof Other (Please Specify): _____

Height (distance from top of sign to ground): _____ (feet) **Size** (length and height of sign face) i.e. 6' L x 18" H: _____

Off-street Parking Area or Parking Lot Establish a Home Occupation

Other (Please Specify): _____

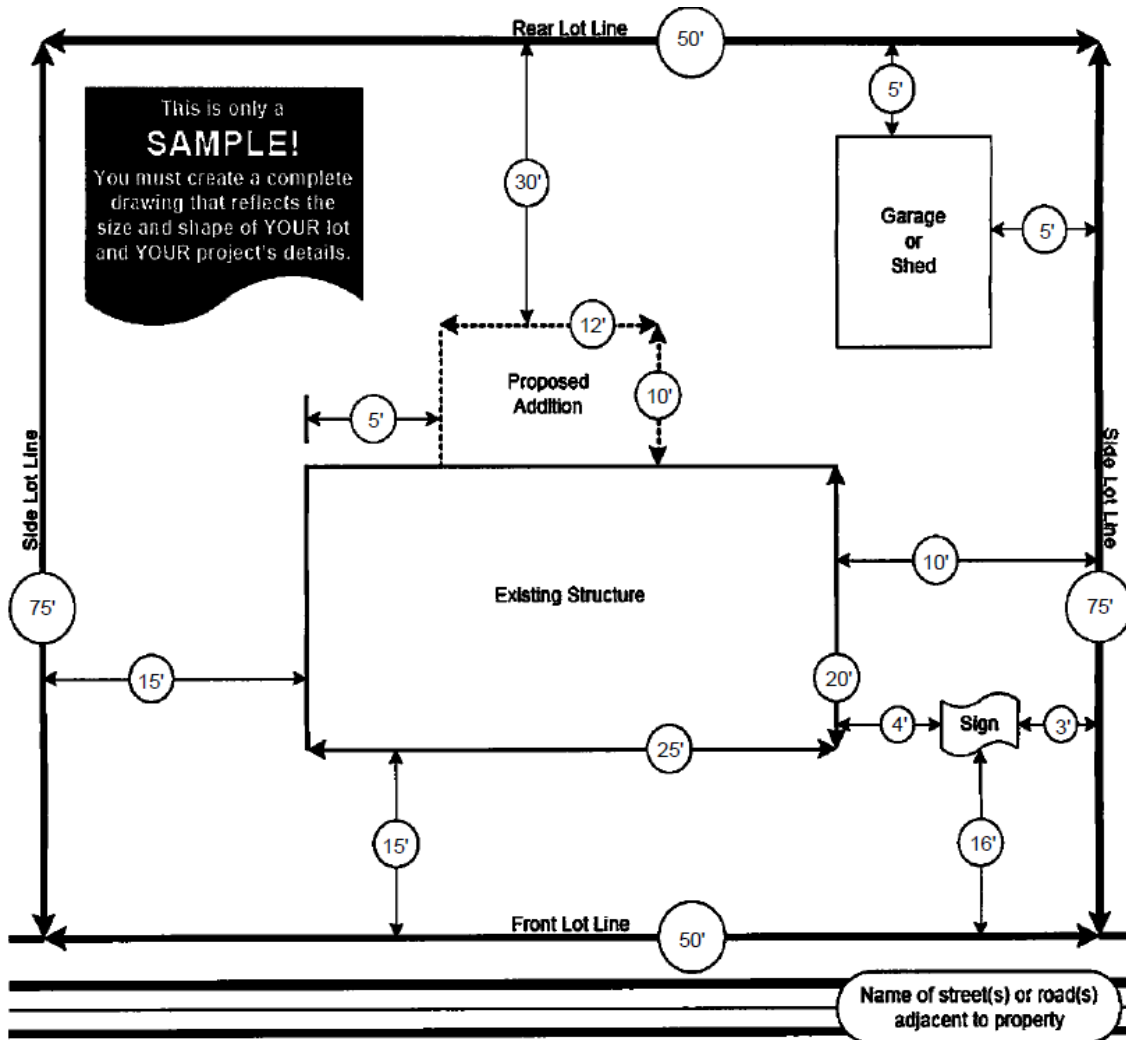
IV. PROJECT DESCRIPTION Provide a narrative which explains the proposed project based upon the items checked in the previous section (III)

Cost of Construction: _____ **Street Access:** Municipal State Other
Sewage Disposal: Public Sewer On-Lot **Water Supply:** Public Sewer On-Lot

V. PLOT PLAN

PLEASE INCLUDE THE FOLLOWING:

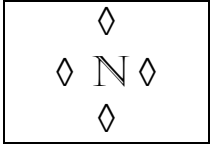
1. Indicate the length of all property lines
2. Show all existing and proposed structures on property and the distance from the structure to the property lines
3. Indicate name of streets abutting property
4. Identify all bodies of water and show distance to proposed structure(s)
5. Show septic, well, driveway locations and distance from new structure to septic
6. Label distances from principal structure to proposed accessory structure(s)
7. Physically mark property lines & proposed location of structure onsite prior to submitting zoning application



IMPERVIOUS COVERAGE

Proposed: _____ (Sq.ft.) Existing: _____ (Sq.ft.)

Address: _____



PLOT PLAN

** A survey or other prepared plot plan can be attached, in lieu of this sketch sheet.*

Approved by: _____ Date: _____ Permit No.: _____

I hereby authorize the Municipality Staff to perform inspections related to this application as may be required between the hours of 8 AM and 8 PM. The applicant understands and agrees to comply with the Pennsylvania Municipal Planning Code and Zoning Ordinance, as amended. All information supporting this application shall become part of the records of the Municipality, cannot be returned and may be examined by the public at any time during the normal working hours of the Municipal Office.

Application is hereby made for a permit to erect or alter a structure which shall be located as shown on the attached diagram/plot plan and/or to use the premises for the purposes herewith. The information which precedes, together with the plot plan/diagram, is made part of this application by the undersigned. It is understood and agreed by the applicant that any error, misstatement or misrepresentation of material, fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application or any change in the location, size or use of structure or land made subsequent to the issuance of this permit without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit.

Applicant Signature: _____

Date: _____

Owner Signature: _____

Date: _____

BOTH SIGNATURES ARE REQUIRED IF APPLICANT IS DIFFERENT THAN OWNER

**** OFFICE USE ONLY ****

Meeting Dates (if applicable)

Historic: _____

Approved: Yes No

ZHB: _____

Approved: Yes No

Planning: _____

Approved: Yes No

Other: _____

Approved: Yes No

PA UCC Construction Permit Required: Yes No

Action Taken: Approved Denied

Zoning Fee: _____

Application Fee Paid: _____

Balance Due: _____

Date Paid: _____

Zoning Officer Signature: _____

Date: _____

If the permit is denied, the zoning officer shall note the applicable sections/basis of denial below:

A copy of the zoning officer's official letter of denial shall be attached to this application.