► LIBERTY TOWNSHIP ◄

39 TOPPER ROAD, FAIRFIELD, PA 17320 PHONE: 717-642-3780
Email: twp.secretary@comcast.net

Date Received:_____ **Permit No.:**_____

ZONING / LAND USE PERMIT APPLICATION

TO BE FILLED IN BY APPLICANT:

Application is hereby made for a permit in compliance with the Municipal Zoning Ordinance. The application shall be considered complete when all adequate required documentation is submitted, zoning permit fee has been paid and the application is signed by the applicant.

A **Site Sketch Plan/Plot Plan shall be submitted with this application** showing the location of the proposed building or use (scale not needed). Show dimensions of all property boundaries comprising the lot/parcel shape, locations of existing right-of- ways, stream(s), flood plain(s), public roadway(s), private road(s), driveway(s), well(s), septic(s), existing structures, and present usage or occupancy. No changes will be made to this application and/or Plot Plan without submitting written notification and plans for such changes.

1. **Location of Property:** _____
2. **Parcel/Tax I.D.#:** _____ **Area of Lot/Parcel** *(sq.ft or acres):* _____
3. **Applicant Information:**

   First Name:_____ Last Name or Business Name: _____

   Street Address (complete)_____

   Phone#:_____ Email:_____
4. **Owner Information:**

   First Name:_____ Last Name or Business Name: _____

   Street Address (complete)_____

   Phone#:_____ Email:_____
5. **Property Information** *(if different from above):*

   First Name:_____ Last Name or Business Name: _____

   Street Address (complete)_____

   Phone#:_____ Email:_____
6. Parking Spaces (off street): Present: _____ Proposed: _____ Height of Proposed Building: _____
7. Present Use: _____ Proposed Use: _____
8. Describe Project (Check all that apply): ☐ Residential ☐ Commercial

   ☐ Erect a New Structure(s) ☐ Pool ☐ Change of Occupancy

   ☐ Replace a Structure(s) ☐ Home Occupation ☐ Demolition

   ☐ Add to a Structure(s) ☐ Change of Land Use ☐ Fence / Wall

   ☐ Erect / Replace a Sign (*See Sign Permit Zoning Application & attach with this application*)

   ☐ Other (Please Specify): _____
9. Cost of Proposed Project: _____ ☐ Estimated or ☐ Actual
10. Describe Proposed Project/Use in more detail: _____

_____

_____

_____

_____

11. Is existing septic system in good condition: ☐ YES ☐ NO ☐ NOT APPLICABLE
12. Has a Permit for an on lot septic system been obtained: ☐ YES ☐ NO ☐ NOT APPLICABLE
    - If yes, date Permit issued: _____and Permit #: _____ **NOTE**: If septic system does not exist nor septic permit has not been issued, no zoning permit will be issued until proof of compliance with DEP regulation for on lot septic disposal is submitted.
13. Road encroachment permit: ☐ Municipal ☐ State
    ☐ Private, Permit issued: ☐ Yes ☐ No ☐ Not Applicable
14. If applicable, Stake corners of new structure location on lot. This should be completed at the time application is submitted for approval. Failure to do this will delay issuing of zoning permit.

I verify that the foregoing statements are true to the best of my information and belief. I understand that false statements herein are subject to the penalties of 18 PA C.S.A. relating to unsworn falsifications to authorities. I also understand that it is the applicant's responsibility to obtain a Building Permit prior to starting construction as per Act 45. 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 certify that the Code official or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project.

_____ _____ _____

Applicant Name – please print *Signature of Applicant* *Date*

► Fee consistent with adopted fee schedule is required at time of the Land Use Permit Application submission – to be paid to Liberty Township - Payment must be received prior to official review – *thank you*◄

Everything Below is for Township Official Use ONLY

Checklist of preliminary requirements for obtaining a building permit, approvals to be obtained prior to applying for a building permit. All items must be addressed. Mark N/A for those that are not applicable. Attach extra sheets if necessary to identify special requirements or conditions.

☐ Sewage facilities planning module, DEP Planning Code # _____, Date of approval _____

☐ Sub-division & Land Development, Municipal resolution # _____, Date of approval _____

☐ Sewage permit from Sewage Enforcement Officer, Permit # _____, Date of approval _____

☐ Storm water management module. Approved by: _____, Date of approval _____

☐ Conservation District notification per Chapter 102. Date of approval _____

☐ NPDES Permit # _____for earth disturbances 1 acre or more, Date of approval _____

☐ Driveway Permit, Penn DOT # _____or Local # _____ Date of approval _____

☐ Public water tap, Permit # _____ Date of approval _____

☐ Public sewer tap, Permit # _____ Date of approval _____

☐ Historical Architectural Review Board, ☐ Check here for Special conditions. Date of approval _____

☐ Zoning, Permit # _____ ☐ Check here for Special conditions Date of approval _____

☐ Other; sluce pipe, road alteration, etc. ☐ Check here for Special conditions. Date of approval _____

☐ Floodplain mapping _____ Project may contain flood plain. Date of review _____

☐ Municipal setback clearances, ☐ Check here for Special conditions. Date of approval _____

☐ Aviation Flight Path or Airport Impact Possible ☐ Check here for FAA or Pa DOT approval Date of approval _____

☐ Extra Pages attached to describe special conditions or circumstance. How many extra pages are attached? _____

For official Use Only

TO BE FILLED IN BY ZONING OFFICER/ADMINISTRATOR:

The following shall be the minimum requirements for the proposed project(s) as set forth in the Liberty Township Zoning Ordinance.

1. Plot Plan Submitted? ☐ YES ☐ NO ☐ NOT REQUIRED
2. Zoning District of Property: _____

   Required Building Setback: Front: _____ Rear: _____ Side: _____

   Proposed Structure Setback: Front: _____ Rear: _____ Side: _____

   Second Structure Setback: Front: _____ Rear: _____ Side: _____

   Does proposed project conform with Building Setback requirements?: ☐ Yes ☐ No ☐ Not Applicable

   Remarks: _____

   _____
3. Minimum Loading Space: _____ Loading Space Provided: _____
4. Maximum Sign Area: _____ Proposed Sign Area: _____
5. Maximum Lot Coverage: _____ Proposed Lot Coverage: _____
6. Remarks: _____

   _____

   _____

   _____
7. Fee: $ _____ Date Paid: _____ (☐ Check #: _____ ☐ Cash)

CERTIFICATION

1. The proposal ☐ DOES ☐ DOES NOT comply with the Liberty Township Zoning Ordinance.
2. The proposal ☐ DOES ☐ DOES NOT require any new water and sewer connection, tapping fees or connection fees and complies with local regulation for water and sewer.
3. A Uniform Construction Code Building Permit is required ☐ YES ☐ NO

   Remark: _____
4. A variance is required ☐ YES ☐ NO
5. A Special Exception is required ☐ YES ☐ NO
6. A permit for the above described project/use was ☐ GRANTED ☐ DENIED ☐ EXEMPT

   on this _____day of _____, 20 _____
7. This permit expires on the _____day of_____, 20_____
8. If applicable, the following conditions were placed on a special exception permit by the Zoning Hearing Board:

   a. _____

   b. _____

   c. _____
9. Signature of Zoning Officer: _____ Date:_____