

LEHIGH TOWNSHIP PERMIT APPLICATION
32 Second Street / P.O. Box 651
Gouldsboro, PA 18424
(570) 842-6262

Lehigh.zoning@gmail.com

____ ZONING ____ BUILDING

PERMIT # _____
ZONING DISTRICT _____

DATE OF APPLICATION ____/____/____ DATE RECEIVED ____/____/____

APPLICATION IS HEREBY MADE FOR A PERMIT IN CONFORMITY WITH THE REQUIREMENT OF THE
LEHIGH TOWNSHIP ZONING ORDINANCE 2011-2 AMENDED. ALL NEW CONSTRUCTION MUST COMPLY
WITH THE PENNSYLVANIA BUILDING ENERGY CONSERVATION ACT 222.

PROPERTY LOCATION / DIRECTIONS:

TAX MAP # _____

PROPOSED USE OF PROPERTY / OR IMPROVEMENT

ERECT A STRUCTURE	_____	ESTIMATED COST	_____
ALTER A STRUCTURE	_____	BUILDING AREA	_____
REPAIR A STRUCTURE	_____	BUILDING HEIGHT	_____
ESTABLISH A USE	_____	STORIES HIGH	_____
CHANGE A USE	_____	PROPERTY SIZE	_____

FLOOD ZONE YES ____ NO ____

DRIVEWAY PERMIT # _____

SETBACKS (feet): FRONT ____ REAR ____ SIDE ____

FURTHER INFORMATION REQUIRED AS FOLLOWS: _____

PROPERTY OWNER _____ PHONE _____
ADDRESS _____ EMAIL _____

CONTRACTOR _____ PHONE _____
ADDRESS _____ EMAIL _____

APPLICANT _____ PHONE _____
ADDRESS _____ EMAIL _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE.
THE ACCOMPANYING PLOT AND PLANS HERETO ATTACHED AND MADE PART HEREOF IS DRAWN TO SCALE. IT
SHOWS THE ACTUAL DEMENSIONS OF THE LOT TO BE BUILT UPON, THE SIZE OF THE STRUCTURE TO BE
ERECTED OR ALTERED AND THE PROPOSED RELATIVE POSITION ON THE LOT OF SUCH STRUCTURE AND ALL
OTHER STRUCTURES.

SIGNATURE OF APPLICANT _____

*** ALL ITEMS IN THIS SECTION TO BE COMPLETED BY TOWNSHIP ***

DATE OF ACTION	GRANTED	DENIED	REMARKS
_____ ZONING FEE _____ BUILDING FEES _____	_____ CHECK # _____ CHECK # _____	_____ _____ _____	_____ _____ _____

A CERTIFICATE OF OCCUPANCY / USE MUST BE ISSUED PRIOR TO THE OCCUPANCY OR USE OF IMPROVEMENT

SIGNATURE OF ZONING OFFICER _____

THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION IS NOT STARTED WITHIN SIX MONTHS AND NOT
COMPLETED BY 1 YEAR OF DATE ISSUE. THIS PERMIT DOES NOT RELEASE THE OWNER FROM THE
REQUIREMENTS OF ANY AND ALL OTHER TOWNSHIP, STATE, AND/OR FEDERAL ORDINANCES. ALL
INFORMATION SUBMITTED SUPPORTING THIS APPLICATION SHALL BECOME PART OF THE RECORDS OF
LEHIGH TOWNSHIP, CANNOT BE RETURNED, AND MAY BE EXAMINED BY THE PUBLIC AT ANY TIME DURING
NORMAL WORKING HOURS OF THE TOWNSHIP ZONING OFFICE.

