

Permit # _____

CLARENDON TOWNSHIP LAND USE PERMIT

***Note: This is not a building permit

IMPORTANT - Applicant to complete all items in sections: I, II, III, IV, and IX

(I): LOCATION OF BUILDING - PARCEL INFORMATION

PARCEL ID #:(This number is on your tax bill) 13-07-_____ - _____ - _____

LOCATION OF CONSTRUCTION: (ADDRESS) _____

BETWEEN _____ AND _____ ZONING DISTRICT _____

(Cross Street)

OWNERS NAME _____ DATE _____

MAILING ADDRESS _____ PHONE _____

CONTRACTOR NAME _____ License # _____

(Lighthouse Village residents only) Enter your lighthouse post number here: _____

(II): TYPE AND COST OF BUILDING - All applicants complete Parts A - D

A. TYPE OF IMPROVEMENT		D. PROPOSED USE	
1 ___ New building (description) _____ 2 ___ Deck ___ Porch ___ Addition 3 ___ Sunroom 4 ___ Repair, replacement 5 ___ Wrecking 6 ___ Moving (relocating) 7 ___ Foundation only ___ Finished basement		RESIDENTIAL 12 ___ One family home 13 ___ Two or more - Enter number of units _____ 14 ___ Garage 15 ___ Carport 16 ___ Porch/Deck 17 ___ Hotel, motel, dormitory enter # of units _____ 18 ___ Pole barn	
		NONRESIDENTIAL 19 ___ Amusement, recreational 20 ___ Church, religious 21 ___ Industrial 22 ___ Parking garage 23 ___ Service station/repair garage 24 ___ Hospital, Institutional 25 ___ Office, bank, professional 26 ___ Public utility 27 ___ School, library, educational 28 ___ Store, mercantile 29 ___ Tanks, towers 30 ___ Other _____	

B. OWNERSHIP

8 ___ Private, (Individual, etc) _____

9 ___ Public, (Federal, State, Local Govt.) _____

C. COST

10 ___ Cost of improvement	\$ _____	Describe in detail proposed use of buildings, example: Size is (24X32) Pole building, stable, livestock barn, equipment storage, shed, machine shop, stick built home, modular, deck, porch, office building, etc.
a. electrical	_____	
b. plumbing	_____	
c. heating/air cond.	_____	
d. other	_____	
11 ___ TOTAL COST OF IMPROVEMENT	\$ _____	
___ FEE ENCLOSED	\$ _____	

III. SELECTED CHARACTERISTICS OF BUILDING:

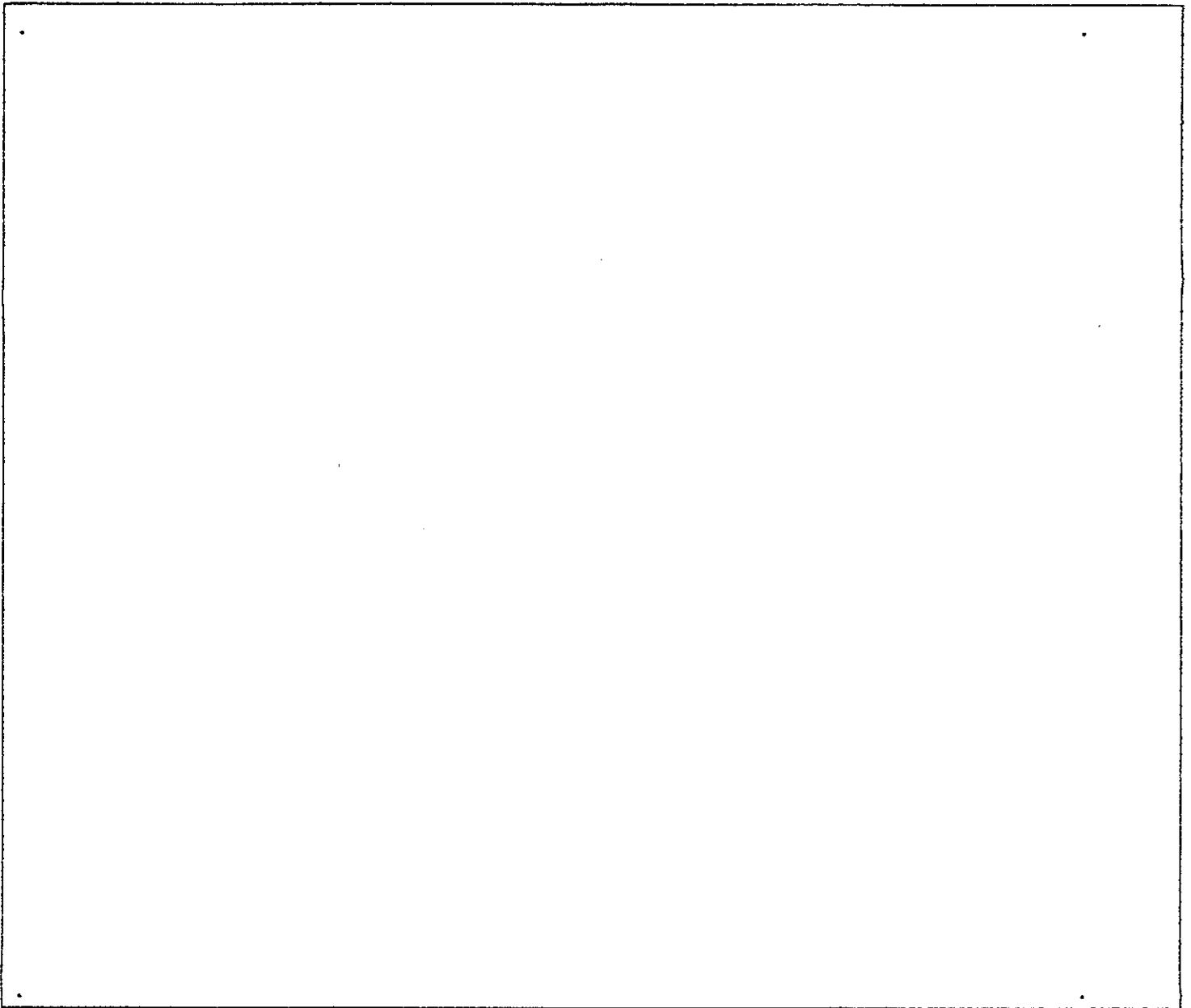
E. PRINCIPAL TYPE OF FRAME	G. TYPE OF SEWAGE DISPOSAL	J. DIMENSIONS
31 ___ Masonary (wall bearing) 32 ___ Wood frame 33 ___ Structural steel 34 ___ Reinforced concrete 35 ___ Other (specify) _____	41 ___ Public or private company 42 ___ Private (septic tank, etc.)	49 ___ Number of stories _____ 50 ___ Square ft. of 1 st floor _____ 51 ___ Square ft. of 2 nd floor _____ 52 ___ Total square feet of all floors, based on exterior dimensions _____ 53 ___ Total land acreage _____
F. TYPE OF HEATING	H. TYPE OF WATER SUPPLY	K. # OF OFF-STREET PARKING
36 ___ gas 37 ___ oil 38 ___ electric 39 ___ coal 40 ___ other (specify) _____ ___ Fireplace? _____	43 ___ Public/private 44 ___ Private (well, cisten)	54 ___ enclosed _____ 55 ___ outdoors _____
I. TYPE OF MECHANICAL		L. RESIDENTIAL BUILDING ONLY
Air conditioning? 45 ___ yes 46 ___ no Elevator? 47 ___ yes ___ no		56 ___ Number of bedrooms _____ 57 ___ Number of bathrooms _____ number of full _____ number of partial _____

I certify that the proposed work is authorized by the owner of record and I have been authorized by owner to make this application as the authorized agent and agree to conform to all zoning rules of ClarendonTownship.

SIGNATURE _____ **DATE** _____

OWNER MUST COMPLETE DRAWING OF PROJECT

Drawing must show dimensions of the construction along with where the project is located on the parcel of property in relation to the road and other buildings.



ZONING EXAMINERS NOTES – For office use only (DO NOT WRITE IN THIS AREA)

Use:	_____	Front Yard	_____
Side Yard	_____	Side Yard	_____
Rear Yard	_____		

NOTES: _____

