Application for Zoning Permit

Date:/			Permit No.:
Location of Property			
ame of Property Owner:		Phone:	
Address:			
Name of Contractor:		Phone:	
Proposed Construction:			
New single Family Dwelling☐ Temporary Use☐ Other	☐ Accessory Building		☐ Swimming Pool☐ Sign
Size of Proposed Constructi	on:		
Width x Total Sq. Ft	Depth	Height	
Location on Property:			
SETBACKS: (Distance from propert Front: ft. Left: ft. PROPOSED START DATE:/	Rear: Right:		
REMARKS: NO LIVING SPACE PERMI			
I hereby certify that all the information my knowledge. I hereby consent to the thereon by the Township Zoning Comp completed or the use described in the extension has been granted, then the z	inspection of the property an liance Officer. I hereby acknow zoning certificate has not begu	d of any buildings or vledge and understa ın within (1) year fro	structures to be constructed nd that if the construction is not
Applicants Signature	/ Dat	/ re	\$ Fee
Upon the basis of the informatio the New Jasper Township Zoning	n contained herein, the p	proposed use is fo	ound to be in compliance with
Date application Approved:		New Jasper To	ownship Zoning Inspector