



CONTROL # \_\_\_\_\_

# MANCHESTER TOWNSHIP ZONING PERMIT APPLICATION

ZONE \_\_\_\_\_

PROPERTY OWNER: (PLEASE PRINT OR TYPE) \_\_\_\_\_

DATE \_\_\_\_\_

OWNER'S NAME \_\_\_\_\_

PHONE # \_\_\_\_\_

OWNER'S ADDRESS \_\_\_\_\_

FAX # \_\_\_\_\_

\_\_\_\_\_

EMAIL \_\_\_\_\_

**DESCRIPTION OF WORK:**

\_\_\_\_\_

**LOCATION OF WORK IF OTHER THAN THE PROPERTY OWNER'S ADDRESS:**

\_\_\_\_\_

**REQUIRED SUBMISSIONS:**

1. **NEW SINGLE FAMILY DWELLING:** 3 SEALED PLOT PLANS THAT CONFORM TO ALL REQUIREMENTS **\$175**
2. **TREE CLEARING:** 2 SEALED PLOT PLANS SHOWING ALL LIMITS OF CLEARING. **\$75**
3. **ALL OTHER DEVELOPMENT ON AN EXISTING LOT:** ACCURATE TO SCALE SURVEY DEPICTING ALL PROPOSED & EXISTING DEVELOPMENT (I.E. \*SHED, ADDITION, DECK, FENCE, POOL, ETC.). **\$25**
4. **DETACHED STRUCTURES:** \*ANY DETACHED STRUCTURE LARGER THAN 250 SF MUST PROVIDE PLANS DEPICTING HEIGHT OF THE STRUCTURE. **\$25**
5. **NEW BUSINESS TENANT:** MUST PROVIDE A DETAILED DESCRIPTION OF USE ALONG WITH ALL SIGNAGE. **\$25**
6. **HOME OWNER'S ASSOCIATION APPROVAL IS REQUIRED FOR ANY DWELLING IN RETIREMENT COMMUNITY.**

**OWNER'S SIGNATURE** \_\_\_\_\_

**AGENT                      TENANT                      CONTRACT PURCHASER (CIRCLE ONE)**

NAME \_\_\_\_\_

CONTACT # \_\_\_\_\_

ADDRESS: \_\_\_\_\_

FAX NUM. \_\_\_\_\_

\_\_\_\_\_

EMAIL \_\_\_\_\_

I HEREBY CERTIFY 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/HER AGENT OR TENANT AND WE AGREE TO CONFORM TO ALL APPLICABLE ZONING LAWS OF THIS JURISDICTION.

\_\_\_\_\_  
(AGENT/TENANT/CONTRACT PURCHASER'S SIGNATURE)

**FOR OFFICE USE ONLY**

DATE RECEIVED: \_\_\_\_\_

CONTROL # \_\_\_\_\_

**ZONING OFFICER:** APPROVED \_\_\_\_\_

DENIED (REASON) \_\_\_\_\_

**SECRETARY :** Bd. App. YES \_\_\_ No \_\_\_ If Yes, CASE # \_\_\_\_\_ RESOLUTION ATTACHED: **Y OR N**

**PAYMENT:** CASH \_\_\_\_\_ CHECK \_\_\_\_\_ CC \_\_\_\_\_ RECEIPT # \_\_\_\_\_