



Department of Planning and Zoning

1840 Municipal Drive Lancaster, PA 17601-4162
 (717) 569-6406 Fax (717) 560-4183

ZONING PERMIT APPLICATION

PRINT CLEARLY

Date: _____

Permit Number: _____

PROPERTY OWNER'S NAME	PHONE NO.	"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 an authorized agent and I agree to conform to all Manheim Township Ordinances as well as all statutes and regulations of the Commonwealth of Pennsylvania, including compliance by all sub-contractors with the Pennsylvania Worker's Compensation reform Act of 1993."
ADDRESS (NO P.O. BOXES)	EMAIL:	
CITY	STATE ZIP CODE	
PROJECT CONTACT	PHONE NO.	
ADDRESS (NO P.O. BOXES)	EMAIL:	
CITY	STATE ZIP CODE	
OWNER <input type="checkbox"/> CONTRACTOR <input type="checkbox"/> ARCHITECT/ENGINEER <input type="checkbox"/>	TENANT <input type="checkbox"/> OTHER <input type="checkbox"/>	
TENANT'S NAME (IF DIFFERENT THAN PROPERTY OWNER)	PHONE NO.	
PROJECT ADDRESS:		
		Printed Name of Property Owner or Authorized Agent (Permit Applicant)

Check All That Apply

Will your project require installation of electric, mechanical, or plumbing?

Yes

No

Shed/Gazebo: Size _____ Square Feet _____ Height _____

Patio: Size _____ Square Feet _____ Height _____

Deck: Size _____ Square Feet _____ Height _____

Driveway: Size _____ Square Feet _____

Sidewalk: Size _____ Square Feet _____

Chickens : How Many _____ Lot Sq. Ft. _____

Fence: Height _____

Other: _____

Description of Work to be Performed: _____

- The issuance of this permit does not release the applicant from the conditions of any applicable subdivision restrictions, township, state or federal regulations.
- Two site plans and the appropriate fee must be submitted with this application.
- It is the responsibility of the property owner to verify property line boundaries and to ensure site improvements do not encroach on easements, clear site triangles, or other restricted areas.
- All Improvements shall be constructed/placed in accordance with this permit.
- Manheim Township does not attest to the accuracy of the site plan.
- Permit shall become null and void if work is not completed within one year of issue date.
- If paying by check, make checks payable to "Manheim Township Commissioners".

FOR OFFICE USE ONLY

SIGNATURE OF PLANNING & ZONING OFFICIAL _____

Zoning District: _____ Approved by: _____ Date: _____ PW:

Residential \$50.00 Non-Residential \$70.00 Cash: _____ Check No. _____ CC

