



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." Signature of Property Owner or Authorized Agent's (Permit Applicant) Printed Name of Property Owner or Authorized Agent (Permit Applicant)	
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 ☐ CONTRACTOR ☐ ARCHITECT/ENGINEER ☐ TENANT ☐ OTHER ☐			
TENANT'S NAME (IF DIFFERENT THAN PROPERTY OWNER)	PHONE NO.		
PROJECT ADDRESS:			

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 no response is received from review comments within 45 days of notification to the contacts listed above, permit will be automatically denied and discarded.
- 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 \$65.00 ☐ Non-Residential \$90.00 ☐ Cash: _____ ☐ Check No. _____ ☐ CC

Void if Not Validated