

Permit # _____ Tax Parcel # _____ Applicant _____
Date of Application _____ Fee \$ (WAIVED)

**Application for Zoning Permit – REPAIR/DEMOLISH/ELEVATE FLOOD DAMAGED STRUCTURE
Borough of Selinsgrove**

Permit Application to (check all that apply):

Repair Principal Residential Building
 Demolish Accessory Non-Residential Structure (incl. fences, walls)
 Elevate Non-Conforming

Applicant Name/Contact: _____

Applicant Address: _____

Applicant Contact Phone # / FAX # / email address: _____ / _____ / _____

Building or structure located at (street address or physical location): _____

PLEASE COMPLETE THIS PORTION OF THE FORM FOR EACH STRUCTURE WHICH IS PROPOSED TO BE REPAIRED, DEMOLISHED, AND/OR ELEVATED (attach separate sheets as needed)

[Call the Borough Office at 374-2311 or stop in our office M-F, 9 AM to 4 PM for assistance in completing this form]

Existing or most recent use of structure: _____

Brief description of proposed repairs, demolition and/or raising of the structure:

Does structure have a basement [], crawl space [], and/or garage/storage space [] under the first habitable floor?

What was the depth of water within basement, crawl space or garage/storage space? _____ feet

What was the depth of water on the first habitable floor of the structure? _____ inches

Was there any damage to the supporting structures (i.e. cracked, displaced, collapsed foundation walls or exterior or interior walls of the structure above the foundation)? YES [] NO [] UNKNOWN []

Describe all significant damage to each of the following elements of the structure:

Foundation: _____

Floor structure: _____

Flooring: _____

Exterior walls: _____

Roof: _____

Interior walls: _____

Plumbing, including water heater/ water softener: _____

Heating/Air Conditioning, including furnace, heat pump, air handler: _____

Electrical system, including water in breaker box: _____

Do you have Flood Insurance? YES [] NO []

Have you had prior Flood Insurance claims for the structure defined above? YES [] NO [] UNKNOWN []

If so, list the amount of the damage claims for any prior damage: _____

Have you had any prior damage from any cause (fire, wind, tree, vehicle or anything else hitting or otherwise damaging the structure, etc.) since 1978 that were not covered by Flood Insurance? YES [] NO [] UNKNOWN []

If so, list the date and estimated cost of any prior damage: _____

Estimated replacement cost of entire structure: \$ _____, source of estimate: _____

Estimated damage to contents: \$ _____, source of estimate: _____

Additional Comments/Explanations of the above:

Permit # _____ Tax Parcel # _____ Applicant _____

Supporting Documentation:

- Copy of an independent contractor's estimated cost and/or an insurance adjuster's estimated cost for the repair of ALL damage resulting from the recent flood for each structure
- Documentation of current market value of each structure from a reliable independent source and/or an insurance adjuster

For a structure located within or adjacent to Flood Plain Districts, check all that apply:

located in FW __, in 100-year FF (Zone AE) __, in 500-year FF (Zone X) __, in FA (Zone A) __
estimated base flood elevation _____ feet (if known)

Other Approvals That May be Required (checked items must be addressed by applicant, prior to occupancy):

- | | | |
|--------------------------|---|--------------------|
| <input type="checkbox"/> | Zoning Permit Occupancy Certificate Issued (describe) _____ | Date Issued _____ |
| <input type="checkbox"/> | Nonconforming Use Certificate Issued (describe) _____ | Date Issued _____ |
| <input type="checkbox"/> | Variance(s) (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Special Exception(s) (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Conditional Use Approval(s) (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Subdivision and Land Development Plan Approval (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Building Permit (CKCOG) Occupancy Certificate Issued (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Demolition Permit (describe) _____ | Date Granted _____ |
| <input type="checkbox"/> | Water Shut-off/Turn-on Approval _____ | Date Issued _____ |
| <input type="checkbox"/> | Grease Trap Inspection/Approval by Borough (describe) _____ | Date Issued _____ |

Procedure to Complete Zoning Permit Application Process

1. A copy of this application is to be displayed at the construction site for the full duration of any construction.
2. **If the proposed project includes construction that is covered under the Pennsylvania Uniform Construction Code**, a copy of this Application for Zoning Permit is to be submitted along with the application for a Building Permit to:
Central Keystone Council of Governments (CKCOG)
1610 Industrial Boulevard Suite 400A
Lewisburg PA 17837
Phone 570-522-1326, or toll free at 1-877-457-9401 Fax 570-522-1327
Web Site: www.ckcog.com
3. A copy of the Building Permit Occupancy Certificate, obtained upon the completion of the Building Permit process with CKCOG, is to be submitted to the Zoning Office of the Borough of Selinsgrove
4. The Applicant must notify the Borough Zoning Office upon the completion of the project and prior to occupancy of the premises
5. A Zoning Permit Occupancy Certificate (see below) will be issued by the Borough of Selinsgrove to complete the Zoning Permit process, prior to occupancy of the premises.

Property Owner Name/Contact (if different than Applicant): _____

Property Owner Address: _____

Property Owner Phone # / FAX # / email address: _____ / _____ / _____

Certification [must be completed by property owner(s) or equitable owner(s)]:

Under the penalties of the Pennsylvania Crimes Code for falsification of information to Authorities, I (we) certify that all information set forth in the above application is true and correct and that all new construction, structural alteration or changes in the use of a building or lot will comply with all applicable codes and ordinances, including but not limited to zoning, floodplain, subdivision and land development, erosion and sedimentation control, building construction, grease traps, industrial waste pretreatment, etc. I (we) also certify that I (we) have read and understand the "Procedure to Complete Zoning Permit Application Process" contained herein and the requirements of § 140-100 and § 140-101 pertaining to Zoning Permits of the Code of the Borough of Selinsgrove.

(applicant's signature)

(date)

(co-applicant's signature)

(date)