

Permit # \_\_\_\_\_ Tax Parcel # \_\_\_\_\_ Property Owner \_\_\_\_\_  
Date of Application \_\_\_\_\_ Fee \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

**Application for Zoning Permit, Borough of Selinsgrove**

Applicant Name/Contact: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Contact Phone # / FAX # / email address: \_\_\_\_\_

**Application for Zoning Permit (check all that apply):**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Verify Zoning Compliance    | <input type="checkbox"/> Principal       | <input type="checkbox"/> Accessory                   |
| <input type="checkbox"/> Erect/Establish New         | <input type="checkbox"/> Residential     | <input type="checkbox"/> Non-Conforming              |
| <input type="checkbox"/> Alter/Change/Repair/Replace | <input type="checkbox"/> Non-Residential | <input type="checkbox"/> Temporary (30 days or less) |

Building, structure or use located at (street address): \_\_\_\_\_

Building, structure or use located within the \_\_\_\_\_ Zoning District

Existing or most recent use of building, structure and/or lot: \_\_\_\_\_

Proposed use of building, structure and/or lot: \_\_\_\_\_

Proposed Improvement: \_\_\_\_\_

Height of Structure: Exist. \_\_\_\_\_ feet/ \_\_\_\_\_ stories Proposed \_\_\_\_\_ feet/ \_\_\_\_\_ stories

Existing lot width \_\_\_\_\_ feet; depth \_\_\_\_\_ feet; Area \_\_\_\_\_ square feet

Front yard setback(s): Existing \_\_\_\_\_ feet, Proposed \_\_\_\_\_ feet

Side yard setback(s): Existing \_\_\_\_\_ feet, Proposed \_\_\_\_\_ feet Existing \_\_\_\_\_ feet, Proposed \_\_\_\_\_ feet

Rear yard setback(s): Existing \_\_\_\_\_ feet, Proposed \_\_\_\_\_ feet

Minimum distance between principal buildings: Existing \_\_\_\_\_ feet, Proposed \_\_\_\_\_ feet

Building coverage: Existing \_\_\_\_\_ sq. ft. \_\_\_\_\_% of lot area Proposed \_\_\_\_\_ sq. ft. \_\_\_\_\_% of lot area

Impervious coverage: Exist. \_\_\_\_\_ sq. ft. and \_\_\_\_\_% of lot area Proposed \_\_\_\_\_ sq. ft. and \_\_\_\_\_% of lot area

Required off-street parking;

Proposed # of employees on largest shift \_\_\_\_\_ Proposed floor area, open to customers \_\_\_\_\_ sq. ft.

Proposed # of seats \_\_\_\_\_ Proposed # of beds \_\_\_\_\_

Off-street parking spaces: Existing standard 9' by 17' \_\_\_\_\_ Proposed standard 9' by 17' \_\_\_\_\_

Driveway(s): Existing driveway width \_\_\_\_\_ ft.; Proposed driveway width \_\_\_\_\_ ft..

Loading/Unloading space, Commercial: Exist. length \_\_\_\_\_ ft. width \_\_\_\_\_ ft. Prop. length \_\_\_\_\_ ft, width \_\_\_\_\_ ft.

**If Located within or adjacent to Identified Flood Plain:**

For a building, structure or use 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.

**Supporting Documentation:** Plan: One copy of a site plan must be provided to illustrate the locations and dimensions for the existing and proposed structures. Dimensions must be noted on the plan.

**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 (approved) 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](http://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 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 will be issued by the Borough of Selinsgrove to complete the Zoning Permit process, prior to occupancy of the premises.

**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 and Occupancy Permit Application" contained herein and the requirements of § 140-100 and § 140-101 pertaining to Zoning and Occupancy Permits of the Code of the Borough of Selinsgrove.

\_\_\_\_\_  
( applicant's signature) (date)

Notes pertaining to review  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Zoning Application Approved on \_\_\_\_\_ By \_\_\_\_\_

Conditions:  
\_\_\_\_\_  
\_\_\_\_\_

Notice sent to applicant on \_\_\_\_\_

Zoning Application Disapproved on \_\_\_\_\_ By \_\_\_\_\_

Reasons:  
\_\_\_\_\_  
\_\_\_\_\_

Notice sent to applicant on \_\_\_\_\_