

**If returning by mail, please mail to:**

Selinsgrove Borough  
1 N. High Street  
Selinsgrove, PA 17870

Date \_\_\_\_\_

Fee \_\_\_\_\_

Date Paid \_\_\_\_\_

Parcel Number \_\_\_\_\_

**Please call (570) 374-2311 for more information**

## Application for Zoning Permit Selinsgrove Borough

Permit No. \_\_\_\_\_

**I. This is to certify that:**

A. Name of property or business owner \_\_\_\_\_

B. Name of applicant if other than owner \_\_\_\_\_

C. Address for which permit is being issued \_\_\_\_\_

D. Contact information:

Phone Number \_\_\_\_\_

Address (if different than above) \_\_\_\_\_

Email Address \_\_\_\_\_

**has applied for a Zoning Permit to:**

Verify Zoning Compliance     Erect/Establish New     Alter/Change/Replace

Principal Structure/Use     Residential     Non-Residential

Accessory     Non-Conforming     Temporary (30 days or less)

Location \_\_\_\_\_

Zoning District \_\_\_\_\_

Estimated Starting Date \_\_\_\_\_

Approximate Construction Cost \$ \_\_\_\_\_

Attached Contractor's Cost Estimate \_\_\_\_\_

Project \_\_\_\_\_

**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 Floodway

Located in 100-year Floodplain with Base Flood Elevations (Zone AE)

Located in 100-year Floodplain without Base Flood Elevations (Zone A)

Located in 500-year Floodplain (Zone X)

Applicant \_\_\_\_\_

**II. Complete the appropriate section(s)**

**A. Proposed Use**

Retail

Professional Service

Restaurant

Residential

Business, Professional or

Government Office

Other \_\_\_\_\_

**B. New Construction**

Lot Information

- 1. Road or street frontage (measured at front building line) \_\_\_\_\_ feet
- 2. Proposed building setback from right-of-way \_\_\_\_\_ feet
- 3. Side yard setback(s) \_\_\_\_\_ feet \_\_\_\_\_ feet
- 4. Rear yard setback \_\_\_\_\_ feet
- 5. Width of the lot \_\_\_\_\_ feet
- 6. Length of the lot \_\_\_\_\_ feet
- 7. Area of the lot \_\_\_\_\_ feet

Structure Information

1. Proposed Structure

- a. Width \_\_\_\_\_ feet x depth \_\_\_\_\_ feet
- b. Height \_\_\_\_\_ feet
- c. Number of stories \_\_\_\_\_ Basement  Yes  No
- d. Contractor Name \_\_\_\_\_  
Address \_\_\_\_\_  
Phone Number \_\_\_\_\_

2. Existing Structure(s)

- a. Width \_\_\_\_\_ feet x depth \_\_\_\_\_ feet

**C. Off Street Parking**

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

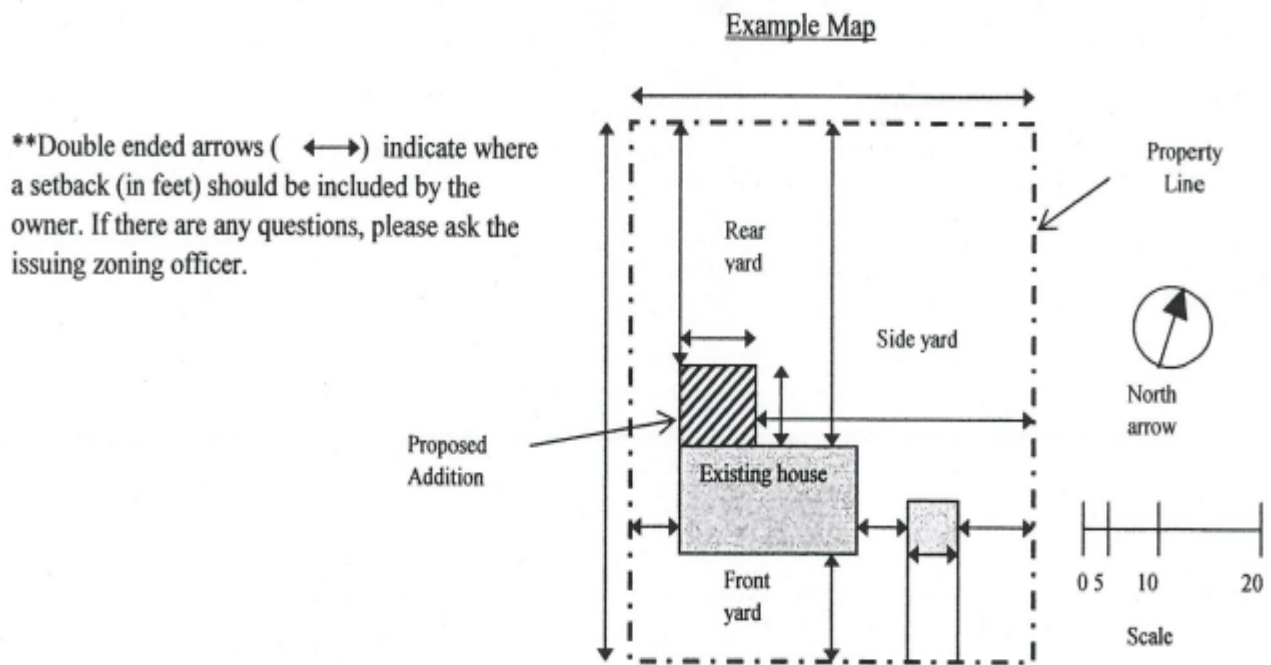
Parking Spaces: Existing 9' by 17' \_\_\_\_\_  
Proposed standard 9' by 17' \_\_\_\_\_

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

Loading/Unloading space, Commercial: Existing length \_\_\_\_\_ ft. width \_\_\_\_\_ ft.  
Proposed length \_\_\_\_\_ ft. width \_\_\_\_\_ ft.

**Complete item III on the next page (page 3).**

III. Attach a scaled drawing showing all existing structures, proposed construction, and relation to all existing roads public/private. Show all setbacks and all existing boundary lines.



**IV. Certifications (must be completed by owner before permits will be issued):**

The Borough of Selinsgrove reserves the right to hold, disapprove, or revoke permits for outstanding compliance issues. Additionally, review of any application for zoning permit may take up to thirty (30) days from the date on which all required materials are received. If additional documentation is required by the zoning officer, the thirty (30) days will restart upon receipt of those materials. Permits are reviewed in the order they are received.

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 (below) and the requirements of §27-1601 and §27-1603 pertaining to Zoning and Occupancy Permits of the Code of the Borough of Selinsgrove. Failure to comply with these regulations and procedures will result in revocation of the permit.

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(Applicant's signature)

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(Date)

**Procedure to Complete Zoning Permit Application Process**

1. A copy of this application and placard 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 the CKCOG, is to be submitted to the Borough of Selinsgrove.**
4. **The Applicant must notify the Borough of Selinsgrove Zoning Office upon the completion of the project and prior to the occupancy of the premises.**

**V. Application Review Record – For Office Use Only:**

Tax Parcel Number \_\_\_\_\_

A. Use

- Meets: 1. District Requirements \_\_\_\_\_
- 2. Number of Parking Spots \_\_\_\_\_

B. New Construction

- Meets: 1. Setback Requirements \_\_\_\_\_
- 2. Building Coverage Limit \_\_\_\_\_ %
- 3. Impervious Coverage Limit \_\_\_\_\_ %
- 4. Floodplain Requirements (if applicable) \_\_\_\_\_
- 5. PennDOT Access approval (if required) \_\_\_\_\_ Date: \_\_\_\_\_

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

Zoning Application Approved on \_\_\_\_\_ by \_\_\_\_\_

Conditions of Approval \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notice sent to Applicant on \_\_\_\_\_

Zoning Application Disapproved on \_\_\_\_\_ by \_\_\_\_\_

Reason for Disapproval \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Notice sent to Applicant on \_\_\_\_\_