

DATE: _____

PARCEL NUMBER: - O|15|_____|_____|_____

SHARON TOWNSHIP STANDARD ZONING APPLICATION

Zoning Permit:_____ Temporary Structure:_____ Sign:_____ Demolition:_____

OWNERS NAME: _____

ADDRESS: _____

PHONE #: _____

CONTRACTORS NAME: _____

ADDRESS: _____

PHONE #: _____

PROPERTY ADDRESS: _____

SUBDIVISION _____ **LOT #** _____ **ACREAGE/SECTION:** _____ **#OF ACRES** _____

SIZE OF LOT: FRONT _____ **REAR** _____ **SIDE** _____ **SIDE** _____

ZONING DISTRICT CLASSIFICATION: _____

GENERAL DESCRIPTION OF THE PROPOSED BUILDING/SIGN:

TYPE OF CONSTRUCTION: _____ **BASEMENT** ___ **FULL** ___ **PARTIAL** ___ **SLAB** ___

SIZE OF BLDG (SQ.FT) _____ **FRONT** _____ **REAR** _____ **DEEP** _____ **HEIGHT** _____

NUMBER OF STORIES _____

ACCESSORY BLDG (SQ.FT) _____ **FRONT** _____ **REAR** _____ **DEEP** _____ **HEIGHT** _____

***For **TEMPORARY STRUCTURES**- performance Bond and Signed Agreement are **REQUIRED**.

DATE TO BE REMOVED: _____

***For **SIGNS**: Describe any lighting or special features: _____

TOTAL SQ FT _____ **LENGTH** _____ **WIDTH** _____

HEIGHT (GRADE TO TOP) _____ **CONSTRUCTION TO BEGIN ON** _____

PLEASE ATTACH THE FOLLOWING FIVE (5) ITEMS:

- A- 1 copy of this form
- B- 3 sets of the building plans
- C- 1 copy of survey (if available)
- D- 1 copy of the legal description
- E- 3 copies of a site plan showing all building setbacks from all property lines, the total acreage and the location of any easements and/or driveways

NOTE: All completed applications and associated fees are to be submitted to the Township Clerk.

(Please make checks and money orders payable to: Sharon Township)

OWNERS SIGNATURE: _____ **DATE:** _____

RECEIVED BY: _____ **DATE:** _____

APPROVED BY: _____ **DATE:** _____

AMOUNT PAID: _____ **CASH** ___ **CHECK #** _____ **DATE:** _____