

# Borough of Wesleyville Zoning Permit Application

Application Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Job Address: \_\_\_\_\_

Property Owner: \_\_\_\_\_

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

Phone #: \_\_\_\_\_

Tenant: \_\_\_\_\_

OFFICE USE ONLY	
Index No: _____	
Zone District: _____	Insurance: <u>Y</u> ___ N ___
Workers Comp. Affidavit: <u>Y</u> ___ N ___	
Permit No.: _____	

Describe Project: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Insurance Co.: \_\_\_\_\_ Copy on File: Y \_\_\_ N \_\_\_

(Check All That Apply)

Type of Construction: Residential \_\_\_\_\_ Commercial \_\_\_\_\_ New \_\_\_\_\_ Reconstruction \_\_\_\_\_  
Demolition \_\_\_\_\_ Detached Garage \_\_\_\_\_ Deck \_\_\_\_\_ Fence \_\_\_\_\_  
Shed \_\_\_\_\_ Pool \_\_\_\_\_ Sidewalk \_\_\_\_\_ Driveway Apron \_\_\_\_\_  
Other \_\_\_\_\_

Size sq. ft.: \_\_\_\_\_ (of garage, deck, shed, pool, structure) Height above Ground \_\_\_\_\_ ft.

Elec. Permit: Y \_\_\_ N \_\_\_ Mech. Permit: Y \_\_\_ N \_\_\_ Sign Permit: Y \_\_\_ N \_\_\_ Building Permit: Y \_\_\_ N \_\_\_

Project Cost: \$ \_\_\_\_\_

Permit Fee: \$ \_\_\_\_\_

Total Fees Due: \$ \_\_\_\_\_

**WORK IS NOT TO BE  
ENCLOSED OR COVERED  
UNTIL INSPECTED**

OFFICE USE ONLY	
APPROVED <input type="checkbox"/>	DISAPPROVED <input type="checkbox"/>
DATE ____/____/____	DATE ____/____/____
Z.O. SIGNATURE: _____	
COMMENTS: _____	
_____	

**PLEASE READ AND SIGN:** I, the undersigned, do hereby affirm the statements are true and correct and the information on this application may be relied on by the Borough in considering the permit. Any false statements made knowingly shall be grounds for revocation of this permit and may be grounds for criminal action. Upon approval, all fees shall be paid before any permits are issued.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Index No. \_\_\_\_\_

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

Type Improvement: \_\_\_\_\_

Est. Construction Cost: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Lot#: \_\_\_\_\_ LERTA: Yes/No Confirming: Yes/No

**ZONING PERMIT SITE PLAN**

Zoning Permit #: \_\_\_\_\_

Date: \_\_\_\_\_

Zoning Permit Authorization: \_\_\_\_\_

Comments: \_\_\_\_\_

ZONING PERMIT IS NOT VALID UNLESS SITE PLAN IS AUTHORIZED BY BCO/INSPECTOR BELOW:

\_\_\_\_\_  
BCO/Inspector Site Plan Verification

\_\_\_\_\_  
Date

Revised Site Plan Authorized (if applicable) \_\_\_\_\_

(Inspector)

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Zoning Hearing Board Decision Date (if applicable): \_\_\_\_\_