

# Borough of Wesleyville Zoning Permit Application

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

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

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

Address \_\_\_\_\_

Tenant \_\_\_\_\_

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

OFFICE USE ONLY	
Index No. _____	
Zone District _____	Insurance Y ___ N ___
Workers Comp. Affidavit Y ___ 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: \$ \_\_\_\_\_

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

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

**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.

(Please Print)

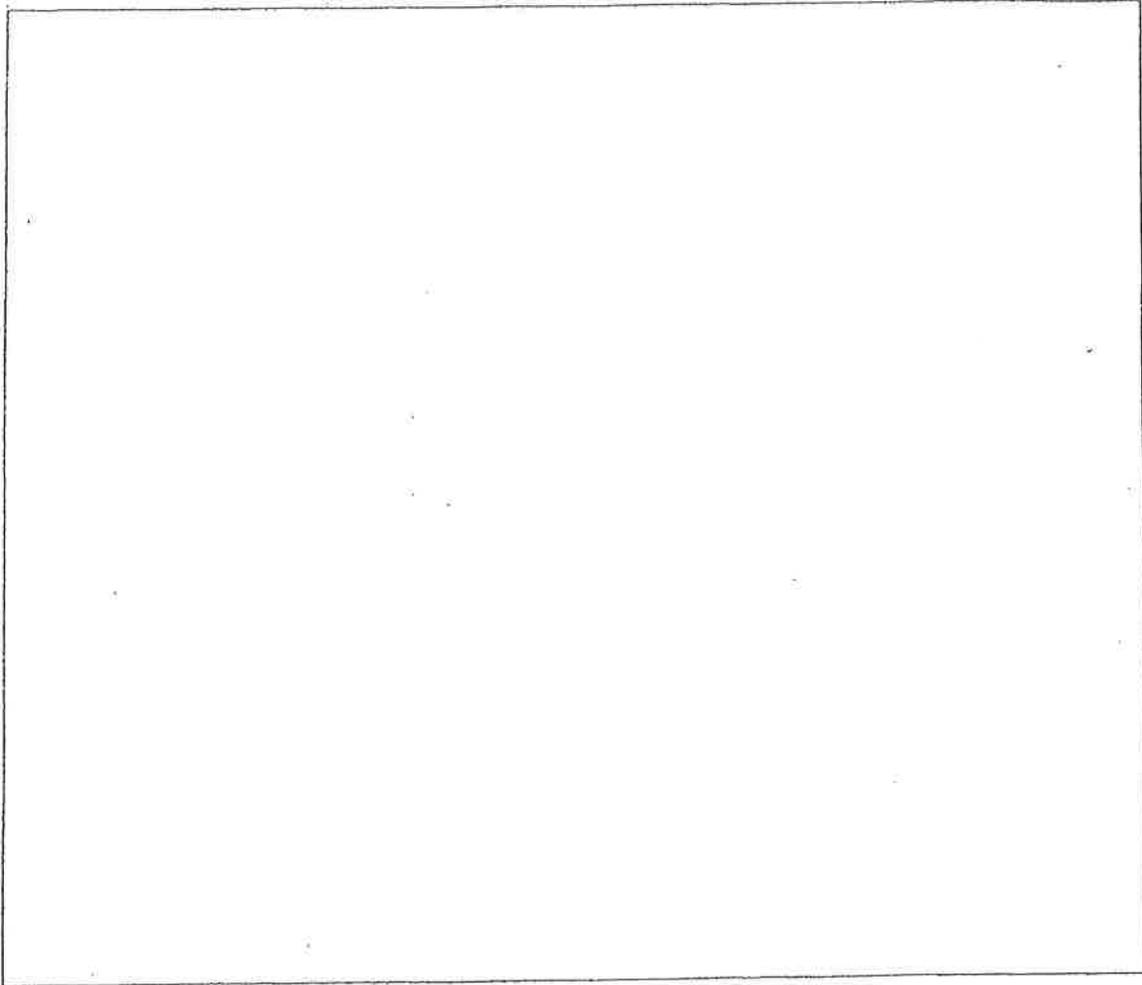
(Signature)

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

Type Improvement \_\_\_\_\_ Est. Construction Cost \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_ LERTA: Yes/No Conforming: 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.**

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

BCO/Inspector Site Plan Verification

Revised Site Plan Authorized (If Applicable) \_\_\_\_\_

(Inspector)

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

ZHB Decision Date (if applicable): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_