

Property Parcel #

**ZONING PERMIT APPLICATION- Structures & Use**

Mount Joy Township Zoning Office  
 902 Hoffman Home Road Gettysburg, PA 17325  
 Voice:(717) 359-4500 Email: zoning@mtjoytp.us Zone Permit # \_\_\_\_\_

PROPERTY OWNER'S INFORMATION		
Name	Daytime phone:	Alternate phone:
Address	Email:	

APPLICANT'S or CONTRACTOR'S INFORMATION (If different than owner)		
Name	Daytime phone:	Alternate phone:
Address	Email:	
<input type="checkbox"/> legal owner (property owner) <input type="checkbox"/> tenant (application must be accompanied by written permission of property owner) <input type="checkbox"/> equitable owner (application must be accompanied by option or agreement of sale)		
<b>Contractor's PA Registration No. REQUIRED:</b>		
Contractor/Owner is responsible for placement of construction within required setbacks		

PROPERTY INFORMATION		
Address:	Lot size:	Zoning district:
<b>Water:</b> well    public water: _____	<b>Sewer:</b> on-lot    public sewer: _____	

DESCRIPTION OF APPLICATION			
<b>Type of Application:</b>	New Building/Structure Building/Structure Expansion	New Use	Change of Use
Other _____			
<b>Describe Project (attach additional sheets if needed):</b> (attach plot plan with boundaries, structures and measurements showing WHERE structures and driveways, sidewalks patios etc. will be placed)			
<b>Current Use/Building Type:</b> Residential    Agriculture Other _____		<b>Proposed Use/Building Type:</b> Residential    Agriculture Other _____	

For New building/structures or Additions (including patios, driveways, etc):				
Description	Length	Width	Total SQ FT	Height

**Planned Setbacks:** Distance From Center Line \_\_\_\_\_ Rear from Property Line: \_\_\_\_\_  
 Side from Property Line: N/W \_\_\_\_\_ S/E \_\_\_\_\_

**By signing this application, I declare that:**

- I am the title owner of record of the property (landowner), agent of the landowner, or tenant with permission of the landowner, or the holder of an option or contract to purchase the property.
- The information provided in this application is accurate to the best of my knowledge.
- By signing this application, I acknowledge that I am responsible for paying any actual expenses, in excess of the application fee for types of application marked with the (\*), that the Township incurs in processing the application, and that such payments are due and payable within 10 business days of the date on the Township's invoice.

**APPLICANT IS REQUIRED TO READ AND CHECK THE FOLLOWING**

By checking this box, I affirm that I have attached a site plan showing exact size and location of any proposed construction as well as any existing buildings and structures (including dimensions), septic system, well, easements, rights-of-way, property and lot lines, and site dimensions, or other information as is required by the provisions of the Zoning Ordinance to accompany this application.

By checking this box, I hereby grant permission for the Zoning Officer to enter onto my property to conduct compliance inspections while this application is under consideration and any issued Zoning Permit is in effect.

By checking this box, I understand that false information provided on this application may result in a stop work order or revocation of the permit and that false statements herein made also are subject to the penalties of 18 Pa.C.S.§4904, relating to unsworn falsification to authorities.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

*This application is an important legal document. Township employees will provide general assistance but cannot provide legal advice. If you have secured legal counsel for this application, **please provide the contact information for your attorney below:***

Attorney Name: \_\_\_\_\_

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

\_\_\_\_\_

Email address: \_\_\_\_\_

## For MT JOY TWP Use Only

**TWP Required Setbacks:** ROW from Center Line \_\_\_\_\_ Front Setback from ROW: \_\_\_\_\_  
**TOTAL Setback from CL** \_\_\_\_\_  
 Rear from Property Line: \_\_\_\_\_ Side from Property Line: \_\_\_\_\_

**IF parcel is in an HOA, does HOA approve proposed setbacks via letter of approval? YES NO**

**Use Permitted by:**  **Special Exception**  
 **Variance**  
 (to be approved by Zone Hearing Board before Zoning Permit issued)

**Use Permitted by:**  **Conditional Use**  
 (to be approved by Board of Supervisors before Zoning Permit issued)

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**Date of action:** \_\_\_\_\_

**By:**  Zoning Hearing Board  Board of Supervisors  
 Approval  Denial  Approval with conditions

**UCC Building Permit required?** Yes No

**Land Development Plan required?** Yes No

**FLOODPLAIN** Will any portion of the site be developed that is within the floodplain, floodway, or other special flood hazard area? Yes No

**Floodplain Development Permit required?** Yes No

**Storm Water Level Management:** **N/A 1 2 3 4**

**Stormwater Management Plan required?** Yes No  
 (for SWM Level 3-4)

**SWM Operation & Maintenance Agreem't Required?** Yes No

Date received:  
  
 Date returned because of incomplete application:  
  
 Date complete application accepted:

Date Zoning Permit issued:  
  
 Date Letter of Zoning Permit Exemption Issued:

Fee Name	Amount	Check #/ Cash	Date Paid
Zoning Permit Fee			
SWM Level ___ Fee			