



Borough of Honesdale
958 Main Street, Honesdale, PA 18431
570-253-0731, 17 • www.honesdaleborough.com

Zoning Office
570-647-0091 Fax
zoning1@honesdaleborough.com

APPLICATION FOR ZONING PERMIT

Please print legibly-failure to do so may result in a denial, delay or rejection of this application.

Property/Site Address: _____
(COMPLETE 911STREET ADDRESS OR STREET & LOT#)

PIN: _____ Tax Account: _____
(14 DIGIT PROPERTY IDENTIFICATION NUMBER)

Zoning District: ____ Zoning District of adjacent property: ____

Residential Commercial

Rental Yes ___ No ___ Short-Term Yes ___ No ___

LAND/PROPERTY OWNER: check here if applicant

Name: _____

Mailing Address: _____

Phone Number: _____ Email: _____

BUILDING/STRUCTURE OWNER: check here if same as land/property owner check here if applicant

Name: _____

Mailing Address: _____

Phone Number: _____ Email: _____

CONTRACTOR INFORMATION: check here if applicant

Business Name: _____ Office Phone: _____

Business Mailing Address: _____

Contact Name: _____

Direct/Cell Number: _____ Email: _____

TYPE OF PROJECT:

New Structure Addition Alteration Pool Deck Sign Fence/Wall Use (New/Change)

DESCRIPTON OF PROJECT / USE OF PROPERTY:

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Estimated cost of project:\$ _____

*Must be fair market value including materials and labor

Sewage: Public or community Private

Water Supply: Public or community Private

Does this property contain wetlands? ____ _

Is this property within a federally designated flood plain? ____ _

Is this property within a planned community subject to association rules & regulations and/or deed restrictions?

_____ If yes, name of the community: _____

For new structures, additions, signs, decks: Height: ____ Length: ____ Width: ____ _

Setbacks from Property Line: Front: ____ Rear:____ Side 1:____ Side 2:____

Floor area of new construction (sq ft): _____

*based on exterior dimensions, include full basement, porch, deck, attached garage

CERTIFICATION:

I certify that I am the owner of record, or that I have been authorized by the owner of record to submit this application and that the work described has been authorized by the owner of record. I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction and agree to conform to all applicable local, state and federal laws governing the execution of this project. I certify that the Zoning Official or his representative shall have the authority to enter the areas in which this work is being performed at any reasonable hour to enforce the provisions of the codes governing this project. I further certify that this information is true and correct to the best of my knowledge and belief.

This permit is issued only for the purpose applied for and may not be occupied for this purpose until a Certificate of Compliance has been granted. Any alteration or change of use requires an additional Zoning Permit.

Applicant Name: _____

Applicant Signature: _____ Date: _____

**If applicant is not land owner/building owner/contractor/architect/engineer named above*

Business Name: Office Phone: _____

Applicant Mailing Address: _____

Direct/Cell Number: _____ Email: _____

REQUIRED DOCUMENTS:

- Site plan drawn to scale showing the following:
 - o Actual Dimensions and Shape of Lot
 - o Location of all structures on the property (including well, septic & accessory structures)
 - o Location and height of proposed structure in relation to property lines and structures.

FEE CALCULATIONS: *for office use only

Total Permit Fees:	
Less Deposit:	
Balance due:	