

# JEFFERSON TOWNSHIP

7407 LAMOR ROAD

MERCER, PA 16137

TELE: 724-662-3310 , Ext 1 FAX: 724-662-0313

EMAIL: hjeffersontowns@neo.rr.com

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

Application/Permit # \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Owner \_\_\_\_\_

Applicant hereby applies for a Permit to place a structure and/or an accessory structure on a legally owned and/or subdivided lot; plot; or tract of land and agree to comply with all provisions of the Jefferson Township Zoning Ordinance and other applicable ordinances.

Applicant Address \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell \_\_\_\_\_

Applicants Email: \_\_\_\_\_

Project: \_\_\_\_\_ Zoning District \_\_\_\_\_

(attach drawings with all other structures & distant to property lines and center of roadway)

Project Address or nearest assigned number: \_\_\_\_\_

Map # \_\_\_\_\_

Building Use: \_\_\_\_\_

Size: L: \_\_\_\_\_ W: \_\_\_\_\_ H: \_\_\_\_\_ Stories \_\_\_\_\_

Corner Lot: Y N (circle)

UCC Permit Y N (circle)

Mobile Home:	
Size: L _____ W: _____ Yr: _____	
Manufacturer: _____	

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

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

Applicant affirms the foregoing information to be true and correct:

\_\_\_\_\_ / \_\_\_\_\_

Applicant's Signature/Date

The application/permit is void if work is not started within 180 days.

\_\_\_\_\_

Representative, Jefferson Township

<b>Zoning Officer's Use Only</b>	Application: does does not conform with Jefferson Township Zoning Ordinances
Set Back Front: _____	Reason: _____ _____ _____
Set Back Side(s): _____	
Set Back Rear: _____	
Jefferson Township Zoning Officer/Date	