

NOTICE
This permit is void within six months of date of approval unless work or use has started.

HANOVER TOWNSHIP

LEHIGH COUNTY

NOTICE
Proof of Workers Compensation necessary for permit insurance.

2202 Grove Road • Allentown, PA 18103

610-264-1069 / 610-266-9292

APPLICATION FOR ZONING AND/OR BUILDING PERMIT

Application is hereby made for a zoning and/or building permit. The information which follows together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit. This permit applies to zoning and building and shall not relieve applicant from obtaining such other permits as may be required by law.

Building Permit Application Zoning Permit Application Date of Application _____

Application No. _____ Issued _____ Zoning Permit No. _____

Building Permit No. _____

A. LOCATION, OWNERSHIP AND PRESENT USE OF PROPERTY:

1. Street and Number _____
2. Deed Owner _____
3. Owner's Address _____
4. Present Tenant _____
5. Present Number of Dwelling Units _____
6. Present Building. Describe _____
7. Present Use of Land _____
8. Site is Located in _____ Zoning District as shown on ZONING MAP.

B. PROPOSED USE OF STRUCTURE AND/OR LAND:

1. Type of Work: NEW STRUCTURE ADDITION INTERIOR ALTERATION EXTERIOR ALTERATION
USE SIGN FENCE OTHER _____
 2. Proposed Use of Structure _____
 3. Proposed Use of Land _____
 4. Description of Work _____
- Estimated Cost of Construction _____

C. APPLICANT:

1. Name of Applicant _____ Telephone No. _____
2. Address of Applicant _____
3. Owner, Equitable Owner, Lessee, or Authorized Agent for Owner of Subject Property
4. Applicant's Signature _____

D. REFERENCES:

1. Plan is attached hereto. Yes No
2. Plan is located in file _____ Yes No

E. ZONING PERMIT REVIEW AND DATES OF ACTION TAKEN:

1. Application Approved Yes No Fee _____ Date _____ Zoning Officer _____
2. Reason for Denial of Application _____
3. Applied to Board of Adjustment _____ Hearing Date(s) _____ Hearing No. _____
Special Use Application _____
4. Board's Decision Granted Denied Date: _____ ORDER: _____

F. BUILDING PERMIT REVIEW AND DATES OF ACTION TAKEN:

1. Application Approved Yes No Fee _____ Date _____ Zoning Officer _____
2. Reason for Denial of Application _____

REMARKS: _____

