

BOROUGH OF TYRONE
ZONING PERMIT APPLICATION

DATE OF APPLICATION: _____

PERMIT NO. _____

LOCATION OF PROPOSED USE:

ADDRESS: _____ TAX PARCEL # _____

OWNER OF PROPERTY: Article VI Section 6.01 (2)

ADDRESS: _____ PHONE# _____

ZONING DISTRICT Article VI Section 6.01 (2)

R-1 R-2 T-C H-C I-M

PROPERTY INFORMATION

LOT SIZE: Article VI Section 6.01 (2) a. _____

BUILDING/SITE CHARACTERISTICS: Article VI Section 6.01 (2) c.

NUMBER OF RESIDENTIAL DWELLING UNITS: _____ EXISTING _____ PROPOSED

PARKING PLAN: Article VI Section 6.01 (2) d. Submitted Not Submitted

EXISTING USE: Article VI Section 6.01 (2) e.

DESCRIBE THE PROPOSED USE: _____

PLOT PLAN/DRAWING IS REQUIRED

I CERTIFY THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

I HEREBY GRANT PERMISSION TO THE TYRONE BOROUGH ZONING OFFICER TO ACCESS MY PROPERTY AS PART OF THE APPLICATION PROCESS.

I DO NOT GRANT PERMISSION TO THE TYRONE BOROUGH ZONING OFFICER TO ACCESS MY PROPERTY AS PART OF THE APPLICATION PROCESS.

Signature of APPLICANT

Signature of Owner (required if different from applicant)

ALL PERMITS ARE SUBJECT TO A FINAL INSPECTION.