



**East Berlin Borough**  
 128 Water Street  
 East Berlin, PA 17316  
 Phone (717) 259-9224 / Fax (717) 259-8298  
 ebsectreas@comcast.net

## Zoning Permit Application

**FILE No.:** \_\_\_\_\_

### TO BE COMPLETED BY APPLICANT:

Application is hereby made for a permit in compliance with the East Berlin Borough Zoning Ordinance. Applicant hereby certifies that the plot plans submitted with this application are correct and no changes will be made without submitting a written plan for such changes. Application shall be considered as complete when the zoning permit fee has been paid and the application is signed by the applicant.

1. Property Owner(s): \_\_\_\_\_
2. Owner(s) Address: \_\_\_\_\_
3. Applicant: \_\_\_\_\_
4. Applicant Address: \_\_\_\_\_
5. Location of Property: \_\_\_\_\_
6. Area of Lot/Parcel: \_\_\_\_\_ Sq. Ft. or Acres: \_\_\_\_\_
7. Describe Present Uses/Structures: \_\_\_\_\_
8. Corner Lot: YES/NO
9. Off-Street Parking Spaces: Present \_\_\_\_\_ Proposed \_\_\_\_\_
10. Nature of Proposed Project: \_\_\_\_\_  
 \_\_\_\_\_ Erect a New Structure(s) \_\_\_\_\_  
 \_\_\_\_\_ Replace a Structure(s) \_\_\_\_\_  
 \_\_\_\_\_ Add to a Structure(s) \_\_\_\_\_  
 \_\_\_\_\_ Erect/Replace a Sign \_\_\_\_\_  
 \_\_\_\_\_ Change of Land Use \_\_\_\_\_  
 \_\_\_\_\_ Home Occupation \_\_\_\_\_  
 \_\_\_\_\_ Other (Specify Below) \_\_\_\_\_
11. Describe Proposed Use(s): \_\_\_\_\_
12. Height of Proposed Building: \_\_\_\_\_
13. Size of Sign(s) (if applicable): \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_ ht.  
 \_\_\_\_\_ x \_\_\_\_\_ x \_\_\_\_\_ ht.
14. Approximate cost: \_\_\_\_\_
15. Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

☞ Fee schedule is available on the Borough website and in the Borough Hall Office. Please make checks payable to *East Berlin Borough*. (Cash payments are not accepted.)

☞ Please mail or deliver this application with fee to East Berlin Borough Office, 128 Water Street East Berlin, PA 17316. There is a locked drop box next to the main entry if the office is closed. Call with questions (717) 259-9224.

**For official use only:**  Date application received \_\_\_\_\_  Date payment received \_\_\_\_\_  
 Date application forwarded to Zoning Officer \_\_\_\_\_  Date received by Zoning Officer \_\_\_\_\_  
 Date certification sent to owner \_\_\_\_\_

**TO BE COMPLETED BY ZONING OFFICER/ADMINISTRATOR:**

The following shall be the minimum requirements for the proposed project(s) as set forth in the East Berlin Borough Zoning Ordinance.

- 1. Plot Plan Submitted? YES / NO / NOT REQUIRED
- 2. Zoning District: \_\_\_\_\_
- 3. Setback Information:

Required:		Proposed:	
		Structure A	Structure B
_____	Front	_____	_____ feet from right-of-way
_____	Rear	_____	_____ feet
_____	Side	_____	feet
	or	_____	feet on one side with a combined total of feet for both sides

- 4. Minimum Loading Space \_\_\_\_\_ Loading Space Provided \_\_\_\_\_
- 5. Maximum Sign Area \_\_\_\_\_ Proposed Sign Area \_\_\_\_\_
- 6. Maximum Lot Coverage \_\_\_\_\_ Proposed Lot Coverage \_\_\_\_\_

7. Remarks:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

8. Fee: \$ \_\_\_\_\_ Date Paid \_\_\_\_\_

Check Number \_\_\_\_\_

**CERTIFICATION**

- 1. The proposal DOES/DOES NOT comply with the East Berlin Borough Zoning Ordinance.
- 2. A variance is required YES / NO
- 3. A Special Exception is required YES / NO
- 4. A permit for the above described project/use was GRANTED/REFUSED on this date:  
Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_
- 5. This permit expires on this date:  
Month \_\_\_\_\_ Date \_\_\_\_\_ Year \_\_\_\_\_
- 6. If applicable, the following conditions were placed on a special exception permit by the Zoning Hearing Board:
  - a. \_\_\_\_\_
  - b. \_\_\_\_\_
  - c. \_\_\_\_\_
  - d. \_\_\_\_\_
- 7. Signature of Zoning Officer \_\_\_\_\_ Date: \_\_\_\_\_