

City of Pittston

OFFICE: (570) 654-0513

OFFICE OF CODE ENFORCEMENT
35 BROAD STREET, PITTSSTON, PA 18640

FAX: (570) 602-1451

ZONING PERMIT APPLICATION

IMPORTANT INFORMATION:

- A site plan **MUST** be submitted with this application that shows the location and size of the lot, locations of the buildings and structures (including freestanding signs) upon the premises (existing and proposed) and their relationship to adjoining premises, public roads and show scale.
- Locate and label clearly and distinctly, showing widths and depths of all existing buildings and structures with a solid line and proposed buildings and structures with a broken line, show widths and depths of all yards, show names of all roads and indicate north with a north arrow. Show location and layout of fencing or screening, off-street parking and/or loading and report number of spaces.
- **FOR SIGNS:** an elevation must be submitted showing dimensions of proposed sign, projection from building (if applicable), height above the ground, location on building and a color graphic depicting sign.

PERMIT ADDRESS: _____

OWNER: _____ APPLICANT: _____

ADDRESS: _____ ADDRESS: _____

PHONE: _____ PHONE: _____

EMAIL: _____ EMAIL: _____

PERMIT PROPERTY INFORMATION:

PRESENT USE OF LAND AND/OR STRUCTURES: _____

PROPOSED USE OF LAND AND/OR STRUCTURES: _____

DESCRIPTION OF REQUEST (ATTACH ADDITIONAL NARRATIVE AS NEEDED): _____

I hereby certify that the information provided on this application is true and correct and I/we agree to conform to all applicable laws of the City of Pittston. I understand that the submission of this application does not guarantee or constitute permit issuance. I further agree that the Zoning Officer shall have the authority to enter the property and building described in this permit to inspect the premises and enforce the provisions of the City of Pittston Zoning Code.

APPLICANT'S SIGNATURE: _____ DATE: _____

NAME: _____ ADDRESS: _____

(Being the person making the above application on behalf and with the full authority of the owner.)

OFFICE USE ONLY

DATE RECEIVED: _____ RESULT: _____ FEE: \$ _____ OFFICER: _____

FLOOD MAP ZONE DESIGNATION: _____ ZONING DISTRICT: _____ COMMENTS: _____