

# Manchester Borough

APPLICATION FOR **ZONING PERMIT** OR USE & OCCUPANCY

(Phone) 717-846-2004 Ext. 104 Please leave a detailed message for a return call

All applicable information must be filled out or the application may be denied.

Use this form **ONLY** for Municipal Zoning Ordinance Compliance  
LOCATION OF PROJECT

Site Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Property Owner(s): \_\_\_\_\_

Owners Address if different than site: \_\_\_\_\_

Owners Phone #: \_\_\_\_\_ Owners Email: \_\_\_\_\_

### CONTRACTORS INFORMATION

**NOTE: ALL Contractors or persons working in Manchester Borough are required to have the appropriate license(s)**

General Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_ License \_\_\_\_\_

Contact Person \_\_\_\_\_ Phone: \_\_\_\_\_ License \_\_\_\_\_

Plumber: \_\_\_\_\_ Phone: \_\_\_\_\_ License \_\_\_\_\_

Electrician: \_\_\_\_\_ Phone: \_\_\_\_\_ License \_\_\_\_\_

HVAC: \_\_\_\_\_ Phone: \_\_\_\_\_ License \_\_\_\_\_

Additional Specialty: \_\_\_\_\_

| DESCRIPTION  | USE PROPOSED  |  |
|--|---|--|
| <p>Check all that apply:</p> <p><input type="checkbox"/> Fence less than 6', not for pools*</p> <p><input type="checkbox"/> Alteration*</p> <p><input type="checkbox"/> Repair, replacement*</p> <p><input type="checkbox"/> Patio or sidewalk*</p> <p><input type="checkbox"/> Deck under 30 inches*</p> <p><input type="checkbox"/> Accessory building under 1000 square feet*</p> <p><input type="checkbox"/> Agriculture building*</p> <p><input type="checkbox"/> Windows/Siding/Gutters*</p> <p><input type="checkbox"/> Roof Replacement *</p> <p><small>*Must meet the exemption requirements of PA Act 45 UCC, or a building permit application is required</small></p> | Residential   | NON-Residential  |
|  | <p>Change of Use Created: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p><input type="checkbox"/> Attached <input type="checkbox"/> Detached</p> <p><input type="checkbox"/> One-Family Dwelling</p> <p><input type="checkbox"/> Two-Family Dwelling</p> <p><input type="checkbox"/> Multi-Family - # of Units = _____</p> <p><input type="checkbox"/> Accessory Building</p> <p><input type="checkbox"/> Other _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p><small>If project requires inspections or meets inspection criteria, a building application should be used - NOT THIS ZONING PERMIT APPLICATION</small></p> | <p>Change of Use Created: <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><input type="checkbox"/> Industrial</p> <p><input type="checkbox"/> Commercial</p> <p><input type="checkbox"/> Service Station, Repair Garage</p> <p><input type="checkbox"/> Hospital, Institutional</p> <p><input type="checkbox"/> Office, Professional</p> <p><input type="checkbox"/> Transient Hotel, Motel, Dormitory</p> <p style="text-align: center;"># of Transient Units = _____</p> <p><input type="checkbox"/> Other _____</p> |

**MUST BE FILLED OUT:**

ESTIMATED COST OF IMPROVEMENT: \$ \_\_\_\_\_ OWNERSHIP: Private \_\_\_\_\_ Public \_\_\_\_\_



