

ZONING PERMIT & APPLICATION – COVINGTON TOWNSHIP

20 Moffat Drive, Covington Township, PA 18444
 Telephone: (570) 842-0457 Fax: (570) 842-2144

DATE OF APPLICATION:	APPLICATION NUMBER – -2021
NAME OF APPLICANT:	WHAT IS PRESENT USE: (State in detail)
NAME OF PERSON COMPLETING APPLICATION: (If applicant is not owner of property, attach authority to make application)	
ADDRESS OF APPLICANT:	WHAT IS PROPOSED USE: (State in detail)
HOME PHONE NUMBER: ()	FEE: \$ _____ <input type="checkbox"/> CASH <input type="checkbox"/> CHECK # _____
WORK PHONE NUMBER: ()	<input type="checkbox"/> SEWAGE PERMIT ISSUED AND ATTACHED
LOCATION OF PROPERTY: (Street address):	APPLICATION FOR A STRUCTURE: (Check all that apply)
TAX MAP PARCEL #: _____	<input type="checkbox"/> PRINCIPAL STRUCTURE
ZONING DISTRICT: _____	<input type="checkbox"/> ACCESSORY STRUCTURE
LOT DEPTH: _____ FT LOT WIDTH: _____ FT	<input type="checkbox"/> ADDITION OR RENOVATION
LOT AREA: _____ () SQ FT () ACRES	<input type="checkbox"/> POOL, FENCE OR SATELLITE DISH
APPLICATION FOR USE: (Check all that apply)	<input type="checkbox"/> STORMWATER MANAGEMENT STRUCTURE
<input type="checkbox"/> NEW PRINCIPAL PERMITTED USE	STATE TYPE OF FOUNDATION: _____
<input type="checkbox"/> CHANGE/EXPANSION OF USE	SETBACKS:
<input type="checkbox"/> NEW/CHANGE IN ACCESSORY USE	FRONT YARD: _____ FT
<input type="checkbox"/> CHANGE OF OCCUPANCY	REAR YARD: _____ FT
<input type="checkbox"/> CURRENT USE IS NON-CONFORMING	SIDE YARD (Left): _____ FT
<input type="checkbox"/> CONDITIONAL USE	SIDE YARD (Right): _____ FT
<input type="checkbox"/> SPECIAL EXCEPTION	HEIGHT OF STRUCTURE: _____ FT
<input type="checkbox"/> TEMPORARY USE	LOT COVERAGE AFTER STRUCTURE BUILT _____%
<input type="checkbox"/> STORM WATER MANAGEMENT USE	IS LOT A STEEP SLOPE OR A WETLAND LOT: YES <input type="checkbox"/> NO <input type="checkbox"/>
ACTION OF ZONING OFFICER: <i>Township Use Only</i>	OTHER DOCUMENTATION:
<input type="checkbox"/> APPROVED – THIS IS YOUR ZONING PERMIT	<input type="checkbox"/> PLOT PLAN IS ATTACHED SHOWING ALL BUILDINGS, USES, LOT LINES, SETBACKS AND DISTANCES.
<input type="checkbox"/> REFERRED TO PLANNING COMMISSION	<input type="checkbox"/> DOCUMENTATION ATTACHED IN ACCORD WITH ZONING ORDINANCE FOR CONDITIONAL USE OR SPECIAL EXCEPTION.
<input type="checkbox"/> REFERRED TO ZONING HEARING BOARD	<i>APPLICATION IS HEREBY MADE FOR THE ABOVE USE/STRUCTURE IN ACCORD WITH THE COVINGTON TOWNSHIP ZONING ORDINANCE. FALSE STATEMENTS ARE SUBJECT TO PENALTY OF 18 PA. C.S. SEC. 4904.</i>
<input type="checkbox"/> DENIED – REASON:	SIGNATURE OF APPLICANT:
DATE OF ACTION:	
ZONING OFFICER SIGNATURE:	