



**NORTH WHITEHALL TOWNSHIP**

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[www.northwhitehall.org](http://www.northwhitehall.org)

**ZONING  
ACCESSORY  
STRUCTURES  
PERMIT  
APPLICATION**

MAIL  PICK-UP

**NOTE: Submissions must include one (1) plot plan containing the information required by Section 103.D.3 of the NWT Zoning Ordinance. Proof of, or waiver from, Workman's Compensation Insurance must be provided at time of submission.**

**A. ZONING PERMIT TYPE**

- SHED LESS THAN -- 200 SQUARE FEET
- ACCESSORY BUILDING – 201 - 1,000 SQ. FT.
- SIGN(S)
- FENCE (CHAIN LINK--PICKETT--SHADOW BOX--SPLIT RAIL--STOCKADE--OTHER) COMPLETE QUESTIONS 4, 5, AND 6 BELOW.
- OTHER \_\_\_\_\_

COMPLETE QUESTIONS 1, 2, 3, AND 4 BELOW

**B. PROPOSED USE**

DESCRIPTION OF PROPOSED WORK: \_\_\_\_\_

**C. IDENTIFICATION**

PROJECT LOCATION (ADDRESS): \_\_\_\_\_

OWNER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ ADDRESS: \_\_\_\_\_ PHONE #: \_\_\_\_\_

**D. STRUCTURE & LOT DIMENSIONS, STRUCTURE & LOT CHARACTERISTICS & STRUCTURE SETBACKS (IF APPLICABLE)**

1. TYPE OF CONSTRUCTION  WOOD FRAME  MASONRY  METAL  POLE BUILDING
2. EXTERIOR STRUCTURE WIDTH \_\_\_\_\_ FEET X EXTERIOR STRUCTURE LENGTH \_\_\_\_\_ FEET = TOTAL AREA OF STRUCTURE \_\_\_\_\_ SQUARE FEET
3. HEIGHT OR DEPTH OF STRUCTURE \_\_\_\_\_ FEET FROM EXISTING GRADE
4. STRUCTURAL SETBACKS FROM PROPERTY LINE (FEET) FRONT \_\_\_\_\_ REAR \_\_\_\_\_ LEFT \_\_\_\_\_ RIGHT \_\_\_\_\_
5. FENCE LOCATION (✓): FRONT YARD \_\_\_\_\_ REAR YARD \_\_\_\_\_ SIDE YARD \_\_\_\_\_
6. FENCE HEIGHT (FEET): FRONT YARD \_\_\_\_\_ REAR YARD \_\_\_\_\_ SIDE YARD \_\_\_\_\_

**E. ESTIMATED COST OF CONSTRUCTION (MATERIALS + LABOR) \$ \_\_\_\_\_**

**NOTE: SUBMISSION OF THIS APPLICATION GRANTS AUTHORIZED REPRESENTATIVES OF NORTH WHITEHALL TOWNSHIP ACCESS TO THIS PROPERTY AT ANY REASONABLE TIME TO INSPECT AND VERIFY THE PROPOSED USE. ALL INFORMATION CONTAINED WITHIN THIS APPLICATION MUST BE IN COMPLIANCE WITH ALL NORTH WHITEHALL TOWNSHIP ZONING ORDINANCES.**

THE INFORMATION PROVIDED ON THIS APPLICATION BY THE APPLICANT(S)/OWNER(S) IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

PROPERTY OWNER'S SIGNATURE

APPLICANT'S SIGNATURE

DATE

**APPLICATION FEE IS NON-REFUNDABLE**

<b>FOR OFFICE USE ONLY</b>		Zoning Review Approved/Denied by: _____	
ZONING DISTRICT: _____		(Zoning Officer)	(Date)
DATE APPLICATION RECEIVED:	_____		
APPLICATION FEE:	\$ _____	\$ _____	
TOWNSHIP TOTAL:	\$ _____	\$ _____	
CASH / CHECK #	_____		ZONING PERMIT # _____