BOROUGH OF CONSHOHOCKEN
400 Fayette Street, Suite 200, Conshohocken, PA 19428
Phone (610) 828-1092 Fax (610) 828-0920

ZONING PERMIT APPLICATION

Permit#_____

For Zoning Use Only	For Office Use Only
Present Zoning District:_____ Lot Size:_____ Proposed Zoning Use:_____ Approved or Disapproved Conditions:_____ Date proposed work was reviewed by zoning:____/____/__ Has the Zoning Board of Conshohocken issued a special exception, variance, or other ruling concerning this proposed work or zoning classification?_____ _____	Date Application Received: Receipt #_____ **Permit Fee $50.00** ❑ Cash ❑Check #_____ Parcel # 0-500-_____ Date Permit Issued:_____ Issued By _____

TYPE OF ZONING PERMIT

❑ Accessory Structure (must be less than 200 square feet) ❑ Shed ❑ Greenhouse ❑ Other Size_____
❑ Driveway / off -street parking Size_____ Material _____ Escrow agreement in place ❑ YES or ❑ No
❑ Fence Height_____
❑ Patio size _____
❑ Walkways (NOT the public sidewalk)
❑ Other (please describe)_____

Location of Property _____ Please provide a plot plan of your property (2 copies)

Is there a written contract between the owner and the contractor? ❑ **Yes Copy Must Be Attached** or ❑ **No**

Contractor's Business Name: License #_____ or applying today - ❑ (please check) Contact Person's Name:	Property owner acting as a contractor ❑ Yes or ❑ No Property Owner's Name:
Street Address City, State & Zip	Street Address City, State & Zip
Daytime Phone	Daytime Phone
Cell Phone	Cell Phone

Is any **Building** work being undertaken? ❑ **Yes OR** ❑ **No** Contractor's Name _____
Is any **Electrical** work being undertaken? ❑ **Yes OR** ❑ **No** Contractor's Name_____
Is any **Plumbing** work being undertaken? ❑ **Yes OR** ❑ **No** Contractor's Name _____
Is any **Mechanical** work being undertaken? ❑ **Yes OR** ❑ **No** Contractor's Name_____

The information provided in this Application is true and correct to the best of my knowledge, information and belief and that these statements are made subject to the penalties of 18 Pa. C.S.A. Section 4904 relating to unsworn falsification to authorities. The undersigned is the owner of said structure or has been authorized by the owner(s) to act as agent in procuring the building permit herein requested. The undersigned also takes full responsibility for all work performed and will comply with all provisions of the Zoning Ordinance, the Building Code and with all other applicable ordinances of Conshohocken.

APPLICATION MUST BE APPROVED, PERMIT ISSUED AND POSTED ON JOB SITE PRIOR TO BEGINNING WORK!

_____ _____
Signature of Owner Date

Revised 12/08