

**ZONING PERMIT APPLICATION**  
**DERRY TOWNSHIP, MIFFLIN COUNTY**  
 73 RESERVE LANE, LEWISTOWN, PA 17044  
 (717) 248-8151 OFFICE (717) 248-0063 FAX  
 PLEASE SUBMIT TO CHRIS DOBSON, ZONING OFFICER  
 zoning@derrytpw.info

**ACCESSORY USE PERMIT**

<b>OWNER(S) NAME</b>	<b>DATE OF APPLICATION</b>	
<b>BUSINESS NAME, IF APPLICABLE:</b>		
<b>MAILING ADDRESS:</b>		
<i>STREET ADDRESS 1</i>	<i>STREET ADDRESS 2</i>	
<i>CITY</i>	<i>STATE</i>	<i>ZIP CODE</i>
<i>PHONE NUMBER</i>	<i>EMAIL ADDRESS:</i>	
<b>PLEASE PROVIDE CONTACT INFO BELOW IF YOU ARE SUBMITTING ON BEHALF OF OWNER(S):</b>		
<i>NAME/ORGANIZATION</i>		
<i>STREET ADDRESS</i>		
<i>CITY</i>	<i>STATE</i>	<i>ZIP CODE</i>
<i>PHONE NUMBER</i>	<i>EMAIL ADDRESS:</i>	
<b>CURRENT LANDOWNER (if different from above):</b>		

# Property Information:

## LOCATION ADDRESS:

*Street Address*

*Street Address Line 2*

*City*

*State*

*Postal / Zip Code*

**PARCEL/TAX MAP #:**

**ZONING DISTRICT:**

**LOT AREA:**

**ESTIMATED COST:**

**IS THERE AN ABUTTING DRIVEWAY TO TOWNSHIP STREET?** \_\_\_\_\_

**OR WILL THERE BE A DRIVEWAY CONSTRUCTED?** \_\_\_\_\_

**PROJECT START DATE:**

**PROJECT COMPLETION DATE:**

# ACCESSORY USE

DIMENSIONS/PERMIT FEE

WILL THIS BE RESIDENTIAL OR COMMERCIAL CONSTRUCTION?

RESIDENTIAL/AGRICULTURAL

COMMERCIAL/INDUSTRIAL

TYPE OF CONSTRUCTION:

Please Check One:

NEW

EXISTING

TYPE OF STRUCTURE:

Please Check One:

SHED (0 – 150 sq. ft.)

SHED (151 – 500 sq. ft.)

GARAGE (not attached to principal structure)

SWIMMING POOL

OTHER

## SHEDS

**\*BASIC PERMIT FEE IS WAIVED. MUST BE ACCESSORY TO A PERMITTED USE.**

Please fill in the dimensions of the proposed construction below:

Sheds between 0 – 150 sq. ft. = \$25

Sheds between 151 – 500 sq. ft. = \$45.00

STRUCTURE HEIGHT (Proposed height as measured from average grade to peak of roof:

*feet*

Please enter the following dimensions to determine the square footage of your new construction:

A. WIDTH                      X                      B. LENGTH                      =                      C. TOTAL SQ. FT.

*feet*

*feet*

= (A X B)

E. = TOTAL PERMIT FEE (1-150 sq. ft.)

E. = TOTAL PERMIT FEE (151-500 sq. ft.)

DESCRIBE STRUCTURE TO BE BUILT:

## GARAGES/SWIMMING POOLS/OTHER

**MUST BE ACCESSORY TO A PERMITTED USE.**

Please enter the dimensions of the proposed construction in

**SECTION A. for RESIDENTIAL OR AGRICULTURAL**

**SECTION B. for COMMERCIAL OR INDUSTRIAL**

**A. RESIDENTIAL OR AGRICULTURAL (PLEASE FILL OUT THE SECTION BELOW)**

Please enter the following dimensions to determine the square footage of your new construction

**STRUCTURE HEIGHT (Proposed height as measured from average grade to peak of roof:  
feet (if applicable))**

<b>A. WIDTH</b>	<b>X</b>	<b>B. LENGTH</b>	<b>=</b>	<b>C. TOTAL SQ. FT.</b>
<i>feet</i>		<i>feet</i>		<i>= (A X B)</i>

<b>D. BASIC PERMIT FEE</b>	<b>+</b>	<b>E. .05 PER SQ. FT. FEE</b>	<b>=</b>	<b>F. TOTAL PERMIT FEE</b>
\$50.00		<i>= (C X .05)</i>		<i>= (D + E)</i>

**DESCRIBE STRUCTURE TO BE BUILT:**

**COMMERCIAL OR INDUSTRIAL (PLEASE FILL OUT THE SECTION BELOW):**

Please enter the following dimensions to determine the square footage of your new construction

**STRUCTURE HEIGHT (Proposed height as measured from average grade to peak of roof:  
feet (if applicable))**

Please enter the following dimensions to determine the square footage of your new construction:

<b>A. WIDTH</b>	<b>X</b>	<b>B. LENGTH</b>	<b>=</b>	<b>C. TOTAL SQ. FT.</b>
<i>feet</i>		<i>feet</i>		<i>= (A X B)</i>

<b>D. BASIC PERMIT FEE</b>	<b>+</b>	<b>E. .10 PER SQ. FT. FEE</b>	<b>=</b>	<b>F. TOTAL PERMIT FEE</b>
\$50.00		<i>= (C X .10)</i>		<i>= (D + E)</i>

**DESCRIBE STRUCTURE TO BE BUILT:**

# SETBACK INFORMATION

SETBACKS (Proposed setbacks as viewed from the street/road). Please provide setbacks on the attached sketch (attach a plat, survey or aerial photograph showing the placement of any proposed structure(s) and include the setbacks).

FRONT

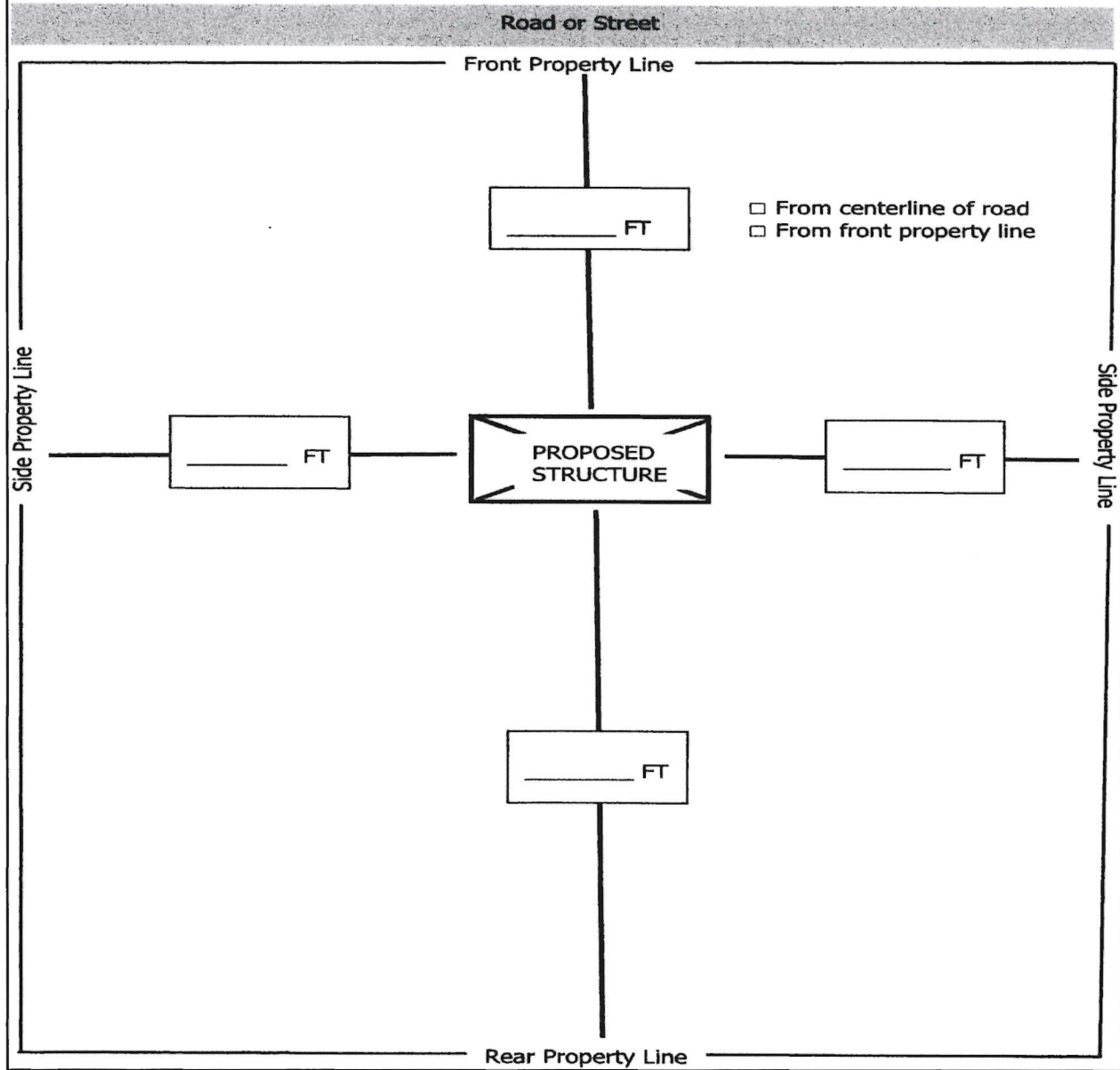
REAR

SIDE

MINIMUM SETBACKS FOR THIS ZONE ARE:  
(TO BE FILLED IN BY ZONING OFFICER)

**SKETCH PLAN** A SKETCH PLAN IS REQUIRED TO BE SUBMITTED WITH ALL PERMIT APPLICATIONS.

## SKETCH





Application for zoning approval must be made by the Landowner or with his/her permission. If the Applicant is different than the Landowner, then one of the following must accompany the application (1) Letter of permission from the Landowner, or (2) Copy of a signed contract or agreement for the work to be done OR (3) Copy of the contract to purchase the property, if applicable.

A Zoning Permit is required for the construction or placement of any structure. A Building Permit may also be required. Please contact the Bureau Veritas office (717-242-0992) for UCC Building Permit requirements.

The information provided, concerning the land use and zoning setbacks, is true to the best of my knowledge. I realize, as owner/applicant, that I am responsible for identifying the property lines for determination of setback compliance. I also realize if the setback requirements of the Derry Township Zoning Ordinance are not met, then I will be in violation of the Derry Township Code

**SUBMISSION DATE:**

\_\_\_\_\_  
 Month            Day            Year

**SIGNATURE:**

\_\_\_\_\_  
 OWNER/REPRESENTATIVE

\_\_\_\_\_  
 PRINT NAME

\_\_\_\_\_  
 CO-OWNER REPRESENTATIVE

\_\_\_\_\_  
 PRINT NAME

<p><b>FOR TOWNSHIP USE ONLY:</b></p> <p>ISSUE DATE OF ZONING PERMIT: _____</p> <p>FEE PAID: _____ DATE PAID: _____</p> <p>APPROVAL/SIGNATURE OF ZONING OFFICER:          _____</p>	<p><b>OTHER PERMITS REQUIRED:</b></p> <p>DEP PERMITS (IF REQUIRED) _____</p> <p>BUILDING PERMIT _____</p> <p>SEWER PERMIT (PUBLIC) _____</p> <p>SEWER PERMIT (ON LOT) _____</p> <p>WATER CONNECTION PERMIT _____</p> <p>DRIVEWAY PERMIT _____</p> <p>NPDES PERMIT _____</p>
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# DERRY TOWNSHIP MUNICIPAL APPROVAL FORM

Parcel # \_\_\_\_\_ Subdivision \_\_\_\_\_ Lot # \_\_\_\_\_

Location of Construction: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Owner Mailing Address: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor Mailing Address: \_\_\_\_\_

## RESIDENTIAL:

- New Single or 2 Family Dwelling       Accessory Structure       Addition  
 Manufactured Home       Manufactured Home Replacement       Deck, Porch, Pool, Solar Panels

## COMMERCIAL:

- New Commercial Building       Commercial Addition       Alterations/Change of Use  
 3+ Family Dwelling       Temporary Job Trailer       Commercial Deck, Porch, Pool, Solar Panels

Description of Work: \_\_\_\_\_ Size \_\_\_\_\_

Construction Cost: \_\_\_\_\_

Attached Plot Plan?

Yes  No

Certificate of Insurance Attached?

Yes  No

*I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.*

Print: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## APPLICANT MUST HAVE TOWNSHIP, BOROUGH OR CITY COMPLETE THE FOLLOWING:

Site Located Within Flood Plain	Zoning Required	Zoning Permit Issued	Zoning Type
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Sewage Required	Sewage Type	Water Tap Required	Water Supply Type
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> On-Lot <input type="checkbox"/> Public	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> On-Lot <input type="checkbox"/> Public

Driveway Permit Required	Stormwater Management Required	Storm Water Management Approved
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Land Development Application Required	Land Development Application Approved
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby certify that this application is in compliance with all relevant ordinances of Township/Borough and therefore eligible for issuance of the building permit.

Print Officer/Secretary: \_\_\_\_\_

Signature Officer/Secretary: \_\_\_\_\_ Date: \_\_\_\_\_