

DATE: _____
APPLICATION NO.#: _____

**BOROUGH OF SOUTH COATESVILLE
APPLICATION FOR ZONING PERMIT**

The undersigned makes application to the Borough of South Coatesville for permission to do the following with the understanding that all pertinent provisions of the Zoning Ordinance must be complied with.

Name of Applicant: _____

Property Address: _____

Address of Applicant: _____

Name of Developer (if any): _____

Address of Developer: _____

Name and Address of Owner if not Applicant: _____

Description of proposal including all actual dimensions and the general shape of the lot, and the location and size of existing and new buildings or structures is accurately shown to scale on the attached plan which is made a part of this application. (See below for MINIMUM items to be shown).

Use of Property: _____

Zoning of Property: _____

Use Permitted in district by Ordinance: _____

Density of Property (dwelling units/acre): _____

Yard requirements met: _____

Lot area and coverage requirements met: _____

Number of off-street parking spaces provided: _____

Off-street loading provided: _____

All necessary State, County and Township requirements have been met: _____

18. Complete name, address, and telephone number of landowner, developer, and/or corporate body:

Signature of Applicant

Signature of Applicant

Application Approved: _____
Zoning Officer

Zoning Permit Issued: _____
Date

Zoning Permit Number: _____

Application not Approved: _____
Zoning Officer Date

Reason for Rejection: _____

Total Fee: \$ _____ received on _____ by _____
Date