



Application for Zoning Permit and/or Impervious Area Modification

Franklin County, Pennsylvania

Borough of Greencastle
60 N. Washington Street
Greencastle, PA 17225
717-597-7143/FAX: 717-597-1022
www.greencastlepa.gov

Value of Work: \$ _____ Date Received: _____ Permit No.: _____

Fee Received: _____ Zoning District: _____ Effective Date: _____

By: _____ Expiration Date: _____

Impervious Area Modifications: Yes No **Mapping Required:** Yes No

The undersigned hereby applies for a permit to build or erect according to the following specification(s) and may apply for a Certificate of Occupancy when said building has been completed and duly inspected.

Name and address of owner: _____

Phone: _____

Property Location: _____

Name and Address of Builder: _____

Phone: _____

Proposed building includes (check all that apply):

New Principal Building Erect Sign Demolition of Existing Building

Altered Principal Building New Accessory Building Other: _____

Mobile Home Altered Accessory Building

Use of principal building: Residential/No. of dwelling units _____ Other: _____

Use of accessory building: Garage Other: _____

Height of Building: Feet _____ Stories: _____ Is there a basement or cellar? _____

Type of Construction: _____

Foundation Material: _____ Wall Material: _____

Description of work (proposed building, alterations, additions, etc. including the project dimensions): _____

Attach a Site Development Plan (or drawing) identifying the following:

1. Lot size (showing width and depth);
2. Any existing buildings;
3. Location of proposed construction/size of proposed structure; and,
4. Distance proposed construction will be located from all property lines.

Estimated construction dates: Starting: _____ Completion: _____

Applicant shall contact a Borough approved building code agency to determine if a building permit is required. (Approved list available at the Borough office or at www.greencastlepa.gov.)

Applicant Signature _____ Date _____

Permit granted: Yes No If denied, reason for denial: _____

Zoning Officer _____ Date _____