

County of Fayette
Office of Planning, Zoning and Community Development
62 East Main Street, 4th Floor Uniontown, PA 15401
724-430-1210
724-430-4029- FAX

APPLICATION FOR ZONING PERMIT

Property Owner's Name _____
Address _____ Phone No. _____
City _____ State _____ Zip Code _____
Previous Owner (purchased within last 2 years only) _____

Municipality _____ Street or Road _____
Subdivision _____ Lot No. on subdivision _____
District _____ Map _____ Lot _____ Acreage _____ Zoning District _____
Present Use of Premises _____

Proposed Use _____
Starting Date _____ Estimated date of completion _____ Type of Construction _____
Height in Stories _____ Building heated by _____ No. of bathrooms _____
Size of Building _____ Estimated Cost for project _____
Has a land development plan been recorded? _____ If so, name of plan _____

Has any of the following been approved by the Zoning Hearing Board
Petition _____ Petition identification _____
Special exception _____
Variance _____
Non-conforming Use _____
Other _____

Type of Sewage: Public/Municipal Sewage _____ On-lot Sewage System _____
Is your property subject to 100 year flood plain as shown on FEMA mapping (§1000-402) _____
Refer to the subsection in the Ordinance so property owner understands
Is your property located in the airport hazard overlay (§1000-401) _____
Refer to the subsection and mapping to determine if property is located in AH overlay

Setbacks will be provided when the permit is issued. Compliance must be met for any structure proposed. Failure to meet the setbacks will result in the application/permit being null and void. You are not permitted to begin construction or use without obtaining the necessary permits, both zoning and/or building permits.

Should it be determined any information in this application is false, the application becomes Null and Void.

Note: Disapproval may be appealed within 30 days to the Zoning Hearing Board. The office has the paper work to file the appeal.

You may be required to obtain a driveway permit from either PennDOT or the municipality.

Date _____ Owner's Signature _____
Date _____ Applicant's Signature _____

Fee _____ Payment (incl. check #) _____ Receipt # _____

Setbacks _____ Taken By _____