CAMBRIDGE SPRINGS BOROUGH

161 Carringer Street, Cambridge Springs, PA 16403 Ph# 814-398-2311 - Fax 814-398-1310

ZONING PERMIT APPLICATION

(Approval of Permit May Take Up To 15 Days)

The Cambridge Springs Codified Ordinances Chapter 1260 – Zoning, requires a Zoning Permit to be issued for any of the listed construction activities, regardless of the fact that such activity may be excluded or exempt from building permit requirements and standards of the PA Uniform Construction Code Act 45 of 1999.

PROPERTY INFORMATION

Property Address/Lo	ocation:		
If Corner Lot, Provid	e Cross Street:		
Property Owner:			
Property Owner Add	dress:		
Phone#:		Cell Phone#:	
(If you are not the p	roperty owner, the	property owner will nee	d to sign the application form)
Contractor: (If appli	cable)		
Contractor Business	Phone#:	· · · · · · · · · · · · · · · · · · ·	
(Fixed location on th		CTURE/ACTIVITY (Che ned to something that ha	eck One) s a fixed location on the ground)
☐ Any Building	□ Addition	□ Carport	□Porch
□Balcony	□Deck	□Swimming Pool	□Fence
□Wellhead Casing	□Billboards	□Signs	
□Shingles & Siding w	here value is great	er than \$1,000.00	
*Exempt from Zonin	g Permit – Sidewal	ks, Driveways, Dog House	2 S

^{*}Exempt from Zoning Permit, but have a minimum property line setback - Steps, Flagpole, Lawn Furniture, Arbors/trellises, Air Conditioning Units on ground, Awnings/Canopies for windows, porches or doors, Chimney, Cornices/Eaves, Belt causes, Sills, Bay windows, Fire escapes, Playground equipment & Laundry drying equipment.

TYPE OF WORK

New Replacement	Alteration	Moving
DIMENSI	ONS OF STRUC	TURE/ACTIVITY
Width	Length	Height
SPECI	FIC DESCRIPTIC	ON OF WORK
Total Estimated Value of Project: \$	<u> </u>	
A SITE PLAN must be attached show dimensions of existing structures ar		lines, the side of the lot, the location & provements.
Applicants Signature:		Date:
Property Owners Signature: (requir	ed)	Date:
ZONING PERMIT FEE: <u>\$25.00</u> (Pay submission.)	ment of permit fe	ee required at time of application
Zoning Permit is va	alid for one yea	r from date of approval.
	OFFICE USE O	NLY
□ Approved		Disapproved
Signature of Zoning Officer:		Date:
Reason for Denial: (If applicable)		
Approval of this application certifie permits may also be required per the		