Zoning Number	
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Zoning Officer

FOSTER TOWNSHIP ZONING COMPLIANCE APPLICATION

1185 E. Main Street

Bradford, PA 16701

814-313-4350

814-362-4656

Date: _____

Applicant Name: _____ Phone: ____

Address: _____

Owner of property: _____ Phone: _____

New Building: Yes No Add to Existing: Yes No

Add Garage: Yes No New Driveway / Street Access: Yes No

Proposed additions or changes: ______

If Yes, You must supply Road Occupancy Permit

Add Fence: Yes No

Foster Township

Commercial Building Change of Use or Occupancy: Yes No

Other: ______

Type of Construction (wood frame, masonry, etc.):______

Dimensions: (L)_____ (W)____ (stories)____ (height)____

Total Construction Value (labor and materials) \$______

What is the zoned district?	
Are there any restriction by deed or details and attach a copy of deed or i	other instrument of record? YES NO If yes, given nstrument.
· •	permit to connect to the township sewer system must be sued. You must attach, to this application, a copy of the paid
9	oved prior to zoning compliance (if applicable) Floodplain nent, Road Occupancy Permits, and any other Local, State, uired.
lot must be provided. This plot plan scale) of the new or proposed buildin measurements and building details of	lan showing exact location of old and new additions on the must show the locations of all utility lines. A drawing (tong and/or additions must be provided and must contain all the proposed new building and/or additions. Please attach rawing, or engineering drawings, or survey.
data will become part of this applicate Foster Township Zoning Ordinance a not limited to "Land Development", proposed erection and/or use of this application and all supporting dates.	rmit for the purpose stated. All plans and other supporting tion. I agree to comply with all applicable provisions of the and all other applicable laws and regulations, including but "Stormwater Management", "Sewer Permit", within the structure or land development, whether specified or not ata is true and correct. Any deviation from this application ct with the Foster Township Zoning Ordinance will render
Signed	Date
\$35.00 APPLICATION FEE PAYABLE T	O FOSTER TOWNSHIP MUST ACCOMPANY APPLICATION
********	**************
NOTES / CONDITIONS:	For Office Use
□ APPROVED	
☐ DENIED	

Date

Zoning Officer

PLOT PLAN Address: _____

Please indicate the following: Property Dimensions, Existing Structures, Areas, Street Names, and Driveway Locations.

Please indicate the location of the proposed new structure (building, shed, pool, fence, etc.) as well as distances to existing structures and property lines.