



1130 N. Bethlehem Pike
Spring House, PA 19477
215.646.5302

ZONING PERMIT APPLICATION

PARCEL OWNER: _____ PHONE: _____ EMAIL: _____

ADDRESS: _____

ZONING INFORMATION: Zoning District: _____ % of Current Impervious Coverage _____ % of Proposed Impervious Coverage: _____

A SITE PLAN SHOWING CURRENT SETBACKS IS REQUIRED WITH SUBMISSION - TYPE OF IMPROVEMENT:

☐ ***FENCE (< 6' IN HEIGHT) *PROPERTY IS REQUIRED TO BE STAKED PRIOR TO INSTALLATION** ☐ **SHED (< 200 SF)** ☐ **PATIO** ☐ **WALKWAY** ☐ **RETAINING WALL (< 4 SF)** ☐
DRIVEWAY EXTENSION (< 1,000 SF) (SEPARATE ROP IS REQUIRED FOR DEPRESSED CURB)

☐ **OTHER:** _____ **COST OF WORK:** _____

Contractor Information (current COI and signed contract is required with each submission): HIC PA License # _____

Contractor Name: _____ Business Phone: _____ Cell Phone: _____

Business Address: _____

Email: _____ LGT Contractor License # (commercial work): C- _____

Approved by Zoning Officer: _____ Date: _____