



# HEIDELBERG

## Township Municipal

EST. 1750 YORK COUNTY PENNSYLVANIA

6424 York Road Spring Grove, Pennsylvania 17362

717-225-6606

### Application for Zoning Permit

Project Location			
Site Address	City	State	Zip
Tax Parcel Number			
Property Owner(s)			
Owner's Address if Different than site			
Owner's Phone Number		Owner's Email	

Contractor Information		
All Contractors/persons working in Heidelberg Township are required to have the appropriate licenses and insurances		
General Contractor	Phone	License
Contact Person	Phone	License
Plumber	Phone	License
Electrician	Phone	License
HVAC	Phone	License
Additional Specialty	Phone	License

Type of Work	Proposed Use	
Check all that apply:	Residential	Non-Residential
<input type="checkbox"/> Fence less than 6', excluding pool	Change of Use <input type="checkbox"/> Yes <input type="checkbox"/> No	Change of Use <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Alteration	<input type="checkbox"/> Attached <input type="checkbox"/> Detached	<input type="checkbox"/> Industrial
<input type="checkbox"/> Repair/replacement	<input type="checkbox"/> Single Family Dwelling	<input type="checkbox"/> Commercial
<input type="checkbox"/> Patio or sidewalk	<input type="checkbox"/> Two Family Dwelling	<input type="checkbox"/> Service Station/Garage
<input type="checkbox"/> Deck under 30"	<input type="checkbox"/> Multiple Dwelling	<input type="checkbox"/> Medical/Institutional
<input type="checkbox"/> Accessory building under 1000 sq. ft.	<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Office/Professional
<input type="checkbox"/> Agricultural building	<input type="checkbox"/> Other _____	<input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Number of Units
<input type="checkbox"/> Windows/siding/gutters		<input type="checkbox"/> Educational
<input type="checkbox"/> Roof Replacement	If project requires inspections or meets inspection criteria, a <b>Building Application</b> should be used, <b>NOT this Zoning Permit Application</b>	<input type="checkbox"/> Other _____
<b>Must meet the exemption requirements of PA Act 45 UCC, or a building permit application is required</b>		

Ownership: <input type="checkbox"/> Public <input type="checkbox"/> Private	Estimated Cost of Improvements	\$
---	--------------------------------	----



# HEIDELBERG

## Township Municipal

EST. 1750 YORK COUNTY PENNSYLVANIA

6424 York Road Spring Grove, Pennsylvania 17362

717-225-6606

### Application for **Zoning Permit**

The owner of this property and the undersigned agree to conform to all State, Federal and Local Laws and Ordinances of Heidelberg Township and by signing this application further state that any misrepresentation of the facts set forth on this application will result in criminal and civil penalties as set forth in PA Crimes Code Title 18, Sections 4903 and 4904 dealing with false statements. I also certify that the work is authorized by the property owner of record and that I have been authorized by the owner to make this application as their authorized agent.

I understand permits may be returned by the County, State or Local agencies and it is my responsibility to obtain any required permits required **prior** to the start of construction. I understand that this application is for Zoning related work only, and any work requiring inspections or that falls under UCC requirements will **not** be performed under this application.

Signature of Applicant/Representative \_\_\_\_\_

Date \_\_\_\_\_

Printed Name of Owner \_\_\_\_\_

Printed Name of Representative \_\_\_\_\_

Title \_\_\_\_\_

**\$50 deposit due at the time of permit application drop off for residential work.  
Failure to pay deposit fee will result in delay of processing application.**

**This box to be completed by Township Staff**

Deposit fee Paid \_\_\_ Y \_\_\_ N

Date \_\_\_\_\_

Cash \_\_\_\_\_

Check # \_\_\_\_\_

attach copy of check

Received By \_\_\_\_\_