



Borough of Lititz, Pennsylvania

Zoning Officer: _____
Approved: _____
Denied: _____
Inspection by: _____
Permit #: _____
Tax ID #: 370-_____

APPLICATION FOR ZONING PERMIT

The undersigned makes application to Lititz Borough for permission to do the following with the understanding that he will comply with all pertinent provisions of the "CODE OF THE BOROUGH OF LITITZ".

1. Property Address _____
 Zoning District _____ Unit Type _____ #of buildings _____
 2. Name of Owner _____ Phone _____
 Address _____
 3. Description of what is proposed (give square footage if applicable) _____

 4. Estimated cost _____
 5. When is project expected to begin _____ When is project expected to be complete _____
 6. Type of use _____ Is use permitted by ordinance _____
 If not, Zoning Hearing Board approval date _____
 7. Is Lot subject to flooding _____
 8. Is property in Historic District _____
 9. General Contractor _____ Phone & Fax _____
 Address _____
 Pennsylvania Home Improvement Contractor Registration # _____
 Subcontractors _____ Phone & Fax _____
 _____ Phone & Fax _____
 _____ Phone & Fax _____
- Additional Comments _____

- Applicant Signature _____ Date _____
 Print Name _____

**PROVIDE PLOT PLAN SKETCH ON OTHER
SIDE OR ATTACH SEPARATE DRAWING**

Fee BP \$ _____
 Other \$ _____
 Total \$ _____

Please fill in all applicable sections. Don't forget to sign and date your application.