

# Tioga Borough

## Zoning Permit Application

|   |          |                  |                |                   |              |
|---|----------|------------------|----------------|-------------------|--------------|
| Application Type <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial |          |                  |                | Parcel #          |              |
| Applicant Name:   |          |                  | Owner Name:    |                   |              |
| Site Address:   |          |                  | Owner Address: |                   |              |
| Site City:  |          |                  | Owner City:    |                   |              |
| Phone:  |          | Cell:            |                | Email:            |              |
| Contractor Name:  |          |                  |                | Contractor Phone: |              |
| Lot Size(circle):   |          | sqft.            | Acres          | Land Disturbance: |              |
| Distance From Lot Lines:  |          | ' to Front       | ' to Back      | ' to Right        | ' to Left    |
| Building Size:  | FT. Wide | FT. Long         |                | FT. High          | # of Stories |
| Estimated Cost: \$  |          | Type of Project: |                |                   |              |
| Project Description: _____  |          |                  |                |                   |              |
| _____   |          |                  |                |                   |              |
| _____   |          |                  |                |                   |              |
| <b>APPLICANT CERTIFICATION</b>  |          |                  |                |                   |              |
| I certify that all information provided on this application is correct and true to the best of my knowledge.                  |          |                  |                |                   |              |
| I agree to not begin construction until all required permits are obtained.  |          |                  |                |                   |              |
| I understand that I must submit any changes to all authorities from which I receive a permit.                                 |          |                  |                |                   |              |
| Signature: _____  |          |                  | Date: _____    |                   |              |
| Print: _____  |          |                  |                |                   |              |

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ Zoning Issued By \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_  CHECK  CASH  Other \_\_\_\_\_ Date \_\_\_\_\_

Tioga Borough  
18 North Main St  
Tioga, Pa 16946

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