SHOHOLA TOWNSHIP

159 Twin Lakes Road, Shohola, PA 18458 (570) 559-7394 (570) 559-7523 (fax)

ONE YEAR ZONING/USE PERMIT APPLICATION

Renewal required after one year for incomplete construction.

(For Office Use Only)

Effective 12:01am

Date Issu	ed Effective 12:01am	Effective 12:01am Zoning/Use Perr		nit # Expires (1) Year	
Issued by	Zoning Enforcement Officer:		Application	Fee \$	non-refundable
	API	LICANT	INFORMAT	ION	
	I hereby give my consent and authorization to Shohola Township Officials to enter on my property for the purpose of conducting necessary inspections with respect to this application for Zoning Use Permit.				
	Print Owners Name		Signature	of Owner	
1.	☐ New Building ☐ Addition ☐ Accessory Structure ☐ Sign ☐ Change of Use ☐ Change of Ownership ☐ Recreational ☐ Temporary				
2.	Location (911 Address)	;			
3.	Tax Map I.D. Number:(You can find this number on your tax bill)				
4.	Description				
5.	Sewage Permit#	Well Permit	= # Ro	oad Access	Permit#
6.	Permanent Address of Ap	plicant			
	Telephone Number				
7.	Name of Contractor				
	Address			_ Telephon	e No
	Pennsylvania Contractor	Registrati	ion #		Exp. Date
(For Office Use Only)					
	mitted \square Conditional Use n:	_	=		Revoked

On a separate page, please provide a "Bird's Eye View Diagram", showing all existing structures and proposed changes, include roads and bodies of water and water courses. Indicate dimension of building, setbacks (front, rear and sides), property lines and driveways.

Upon completion of the project contact Zoning Officer for Certificate of Use which is required before Occupancy. Violations are subject to maximum fine of \$500.00 for each day of violation.

You will have 30 days from the date of the determination of this application to appeal the Zoning Officers decision to the Zoning Hearing Board. A copy of the Zoning Hearing Board application is on-line or may be picked up at the Township Building.