TEMPORARY PERMIT

Applicant: Temproary permit is valid for one year after issue.
Owner:

LUZERNE COUNTY, PENNSYLVANIA

ZONING APPLICATION and PERMIT

Application is hereby made for a permit to erect or alter a structure and/or use the premises for the purposes described herewith. The information that follows is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without approval of the Zoning Office, shall constitute sufficient ground for the revocation of this permit.

APPLICATION

ZONING PERMIT # _____ *ISSUED* _____*MUNICIPALITY* **___NEWPORT TWP.**_

A. LOCATION, OWNERSHIP AND PRESENT USE OF PROPERTY:

1. Number, Street ___ __ Map__ __ Blk. __ __ Lot __ __
2. Deed Owner ____ ____
3. Owner's Address _____
4. Present Tenant ___ ___ Does tenant have Owner's Consent for proposed work? __ __
5. Present Building, Describe ___ ___
6. Present Use of Land **___Residential**_
7. Site is Located in **___R-2___**Zoning District as shown on ZONING MAP.

B. PROPOSED USE OF STRUCTURE AND/OR LAND

1. Type of Work:
   NEW STRUCTURE ☐ ADDITION ☐ INTERIOR ALTERATION ☐ EXTERIOR ALTERATION ☐
   CHANGE OF USE ☐ SIGN ☐ BILLBOARD ☐ OTHER_____
2. Proposed Use Of Structure & No. of Families _____
3. Proposed Use Of Land _____
4. Description Of Work ___ ___
5. Permitted ☐ Prohibited ☐ ESTIMATE COST ___ ___

C. APPLICANT

1. Name Of Applicant ___ ___Phone No.__ __
2. Address Of Applicant _____
3. Owner, Lessee or authorized agent for owner of subject property _____

D. APPROVAL AND DATES OF ACTION

1. Application Approved Yes ☐ No ☐
   Date _____ Zoning Officer _____
2. Reason for Denial of Application _____
3. Applied to Zoning Hearing Board _____Date ___ ___Appeal Yes ☐ No ☐ Hearing No. ___ ___
   Special Exception Application Yes ☐ No ☐
4. Board's Decision Granted ☐ Denied ☐ Date ___ ___ ORDER: ___ ___

REMARKS: **MINIMUM SETBACKS FROM PROPERTY LINES**

Front Yard – ____**Feet**
Rear Yard - **Feet**
Side Yard - **Feet ( )**
Height - **Feet**

PREPARER _____ FEE: _____ Applicant's Signature_____

NOTE: OCCUPANCY PERMIT WILL BE REQUIRED UPON COMPLETION OF WORK

This permit applies to zoning only and shall not relieve applicant from obtaining other permits as may be required by law.
NOTICE: Violation of any provision of this ordinance shall result in daily fines up to $500 per day.