

**WEST MANCHESTER TOWNSHIP
APPLICATION FOR ZONING PERMIT**

Internet Version

Office Use ONLY

Owner	Address	Address of Premises	Permit NO.
Builder	Address	City	Date of Issue
Zoning District	Sub-division Name	Sec. Lot No.	Fee
Existing Use	Proposed Use	No. Buildings	STORM WATER MGMT.
			WATERSHED
			SQUARE FOOTAGE
			FEE

Description of Proposed Work:

Legal Description of Property:

Zoning Stipulation:

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_____	_____	\$ _____
DATE	ZONING OFFICER	ESTIMATED COST
_____		_____
SIGNATURE		PHONE

The above signed applicant hereby makes application for a building permit under all applicable ordinances of West Manchester Township, and hereby certifies, under the penalties of perjury, that all facts set forth herein are true and correct and the actual work will be performed in accordance with the above. Permit can be revoked if its issuance violates the zoning ordinance.

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Internet Version Page #2 - PLOT PLAN

