

Permit No. \_\_\_\_\_ Plan No. \_\_\_\_\_

<h1 style="margin: 0;">ZONING PERMIT</h1> <p style="margin: 5px 0;"><i>NOTE: Site Plans are required for all Applications.</i></p>		<b>TOWNSHIP OF LOWER MERION</b> 75 EAST LANCASTER AVENUE ARDMORE, PA 19003-2376 PH # 610-645-6200      FAX # 610-649-9598 www.lowermerion.org		FEE <hr/> RECEIPT #: <hr/> IMPERVIOUS
LOCATION	TOWN	USE OF PREMISES	PLAN NO.	
NAME OF CONTRACTOR	PH #	ADDRESS OF CONTRACTOR	ZONING DISTRICT	
NAME OF OWNER	PH #	ADDRESS OF OWNER	INSP DISTRICT NO.	
EMAIL ADDRESS AND CONTACT NAME		CERT. OF OCCUPANCY NO.		
<input type="checkbox"/> 1 FAMILY <input type="checkbox"/> 2 FAMILY <input type="checkbox"/> MULTI-FAMILY <input type="checkbox"/> INST. BLDG. <input type="checkbox"/> PUBLIC BLDG. <input type="checkbox"/> BUS. BLDG. <input type="checkbox"/> ALTERATION <input type="checkbox"/> REPAIR <input type="checkbox"/> REPLACEMENT <input type="checkbox"/> NEW CONSTRUCTION				
<input type="checkbox"/> FLOODPLAIN ELEVATION <input type="checkbox"/> FLOODPLAIN CERTIFICATION <input type="checkbox"/> WALL(S) <input type="checkbox"/> GRADING <input type="checkbox"/> FENCE <input type="checkbox"/> IMPERVIOUS SURFACE <input type="checkbox"/> ACCESSORY STRUCTURES <200 SF <input type="checkbox"/> OTHER (SPECIFY) _____				
<b>DESCRIPTION OF PROPOSED WORK</b>				
I HEREBY CERTIFY THAT THE STATEMENTS CONTAINED HEREIN ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF.  <hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center; margin: 0;"><i>Applicant's Signature</i></p>		<hr style="width: 80%; margin: 0 auto;"/> <p style="text-align: center; margin: 0;"><i>Approved By</i></p>		
		DATE ISSUED <hr/> DATE COMPLETED		

IS THIS PROPERTY LOCATED WITHIN A DESIGNATED HISTORIC DISTRICT OR ON THE HISTORIC INVENTORY LIST?     YES     NO