



Hoy Inspection Service LLC

ID # _____

ZONING PERMIT APPLICATION

Permit # _____

Please Complete in Full, All Pages

1. APPLICANTS NAME: _____ PHONE: _____
ADDRESS: _____ EMAIL: _____

NAME & ADDRESS OF OWNER: _____

(If other than applicant)

APPLICANT'S SIGNATURE: _____ DATE: _____

2. NAME OF MUNICIPALITY: _____

SITE ADDRESS: _____

TAX MAP PARCEL NUMBER: _____

EXISTING USE: _____ FLOODPLAIN DISTRICT: _____

3. TYPE OF USE

A: TYPE OF ACTIVITY

___ NEW BUILDING

___ ADDITION

___ ALTERATION

___ RELOCATION

___ CHANGE OF USE

B: PROPOSAL USE-RESIDENTIAL

___ SINGLE FAMILY DWELLING

___ MULTI FAMILY (# OF UNITS)

___ MANUFACTURED HOME

___ GARAGE OR CARPORT

___ OTHER _____

C: PROPOSED USE - NON-RESIDENTIAL

___ COMMERCIAL ___ SIGNAGE

___ INDUSTRIAL

___ INSTITUTIONAL

___ RECREATIONAL ___ HOME OCCUPATION

___ HOME BUSINESS ___ OTHER

EXPLAIN IN DETAIL, THE PROPOSED WORK TO BE DONE IN ALL USES, USE EXTRA PAPER IF NEEDED:

4. STRUCTURAL CHARACTERISTICS AND DIMENSIONS FOR PROPOSED IMPROVEMENT (PARTA-C TO BE COMPLETED)

A: BUILDING AND YARD DIMENSIONS (EXTERIOR)

LENGTH AND WIDTH OF STRUCTURE ___ FT X ___ FT TALLEST EXTERIOR POINT ___ FT

TOTAL LOT AREA: _____ ACRES TOTAL SQ FT OF FLOOR AREA _____

FRONT YARD ___ FT (RIGHT OF WAY TO BUILDING LEFT SIDE YARD ___ FT (BUILDING TO PROPERTY LINE)

RIGHT SIDE YARD ___ FT (BUILDING TO PROPERTY LINE) REAR YARD ___ FT (BUILDING TO PROPERTY LINE)

B: STRUCTURAL & SITE INFORMATION

FLOOR PLANS SUBMITTED ___ YES ___ NO # OF STORIES ___ # OF BEDROOMS ___

SQ FT OF UNFINISHED BASEMENT AREA ___ # OF BATHROOMS ___

% BASEMENT UNFINISHED ___ GARAGE ___ RECREATION ___

LOT COVERAGE AS IMPERVIOUS PERCENTAGE ___ BUILDING % OF LOT ___ ALL SURFACE % OF LOT

AQUATIC BUFFER MIN 50' ___ WOODLAND BUFFER ___ YES ___ NO DRIVEWAY SLOPE OF ___ %

C: SUPPORT INFORMATION (ATTACHED AS NEEDED)

SEWAGE DISPOSAL ___ WATER SUPPLY ___ FLOODPLAIN CERTIFICATE ___

E&S PLAN (OVER 5000 SQ FT) NPDES PERMIT (OVER 1 ACRE) ___ WILL SERVE LETTER ___

OF OFF-STREET PARKING SPACES ___ EXISTING ___ PROPOSED

5. CONSTRUCTION INFORMATION

ESTIMATED COST OF CONSTRUCTION \$ _____ ESTIMATED DATE OF COMPLETION _____

CONTRACTOR NAME _____ PHONE _____

APPLICANT ACKNOWLEDGES ALL INFORMATION IS CORRECT AND ACCURATE TO THE BEST OF THEIR KNOWLEDGE. APPLICANT AGREES NOT TO INITIATE THE PROPOSED PROJECT UNTIL A MUNICIPALLY-ISSUED PERMIT IS OBTAINED. A LOCATION SKETCH SHALL BE DRAWN ON THE NEXT PAGE OF THIS APPLICATION



LOCATION SKETCH – USE ADDITIONAL PAGES IF NEEDED

[Empty box for location sketch]

INSTRUCTIONS – THE LOCATION SKETCH SHOULD SHOW/NOTE SCALE AND NOTE EXISTING AND PROPOSED ITEMS.

1. The relationship of the lot to adjoining properties and roads (provide route number or name)
2. The location of the building on the parcel, the dimensions of the lot line, approximate location of water & sewer
3. The location of any other major lot features: driveways, garage, existing structures, streams, woods, etc.

FOLLOWING SECTIONS TO BE COMPLETED BY ZONING OFFICIAL

APPLICABLE ORDINANCES AND CODES (CHECK APPROPRIATE SPACES)

ZONING CONFIRMING _____ NONCONFORMING ___ SIGN ___ TEMPORARY ___ SUBDIVISION ___ SEWAGE _____
 FLOODPLAIN _____ DRIVEWAY _____ BUILDING CODE ___ TAX PARCEL _____
 ZONING DISTRICT _____
 COMMENTS _____

DISPOSITION ACTION APPROVED ___ DISAPPROVED _____ PERMIT FEE AMOUNT \$ _____
 ZONING OFFICIAL _____ DATE OF ISSUANCE _____
 REASON FOR DENIAL _____

ZONING HEARING DATE _____
 REQUEST _____

BOARDS DECISION GRANTED _____ DENIED _____
 ORDER _____ DATE OF ISSUANCE _____

NOTICES: Issuance of this permit may be appealed by any aggrieved party within 30 days of the date of issuance. Completions and submissions of this application shall not relieve the applicant from obtaining such permits as required by other local, county, state or federal regulations or laws. Supplemental forms may be necessary for floodplain management requirements. Structure may be required to be certified prior to occupancy or use. Any change of plans must be first approved by the Zoning Official.

