

BOROUGH OF THORNBURG

545 Hamilton Road, Pittsburgh, PA 15205
Phone: 412-921-3713
Thornburg.secretary@gmail.com

<u>Municipality Use Only</u>	
Date:	_____
Rcd By:	_____
Fee Rcd:	_____
Check #:	_____

ZONING PERMIT APPLICATION

Please complete **ALL** sections. Application is not considered complete if information is missing.

PROPERTY OWNER: _____

OWNER ADDRESS: _____

PHONE: _____ EMAIL: _____

SITE ADDRESS: _____

TAX PARCEL ID: _____

ZONING DISTRICT (circle): S P-1 P-2 R-1 R-2 R-H I-1

PROPOSED WORK: ___ Fence ___ Addition ___ Inground/Aboveground Pool ___ Shed ___ Deck/Patio
___ Other: _____

LOT / LAYOUT INFORMATION:

Sq Ft of Work	_____ sqft	Height	_____ ft
Front Setback	_____ ft	Side Setback	_____ ft
Rear Setback	_____ ft	Side Setback	_____ ft

CURRENT USE OF PROPERTY: Residential Non-Residential / Commercial

PROPOSED USE OF PROPERTY: Residential Non-Residential / Commercial

REQUIRED DOCUMENTS:

- Dimensional site plan showing property boundaries, proposed work, existing structures, building setbacks and impervious coverage.
- Additional information as deemed necessary by the zoning officer to make a final determination.

I hereby submit this application for a zoning permit only for the location and the work described herein and certify to the accuracy of that information. I further certify I am the property owner, or a duly authorized representative on behalf of the owner(s) of said property, and I have read and understand all of the conditions of this permit and will construct the project in compliance with those conditions and all applicable Municipal Ordinances and requirements.

Signature of Applicant

Date

Printed Name

Payment of \$25 should be made payable to the municipality, with the property address in the memo section.

FOR INTERNAL OFFICE USE ONLY

Complete Application Received: _____	Date Reviewed: _____	Permit No: _____
Approved/Denied (reason): _____		
Zoning Officer Signature: _____		