

Lehman Township Board Of Supervisors

193 MUNICIPAL DRIVE, BUSHKILL, PIKE COUNTY, PENNSYLVANIA 18324 (570) 588-9365 * FAX (570) 588-1864

Requirement for Zoning Permits:

New Principal Building / Expansion of Principal Building / Commercial Buildings, etc.

1. Application – Filled out and signed.
2. Three (3) copies of a plot plan drawn to scale.
(See “Diagram” included with application.)
3. Two copies of an original “sealed” survey of the property completed within three years of the date of application.
4. Signed and completed Central Sewage / Water Certificate. (if applicable)
5. Copy of deed.
6. Check payable to Lehman Township in the amount shown on the Zoning Permit Fee Schedule.
7. Wetlands Certification Form: Must be signed by the owner(s).
8. A \$25.00 Reinspection Fee will be charged for failed inspection. This fee must be paid before the township will do a reinspection.
9. Workmans’ Compensation Insurance Form(s).
10. Trespass Waiver.

Sheds, Fences, Decks (All Permitted Structures – Except New and / or Expansion of Principal Buildings.

1. Application – Filled out and signed.
2. Three (3) copies of a plot plan drawn to scale.
(See “Diagram” included with application.)
3. Check payable to Lehman Township in the amount shown on the Zoning Permit Fee Schedule.
4. Certificate of Occupancy – A written request is required for all permitted structures when completed.
5. A \$25.00 Reinspection Fee will be charged for failed inspection. This fee must be paid before the township will do a reinspection.
6. Workmans’ Compensation Insurance Form(s).
7. Trespass Waiver.
8. Copy of signed contract if over \$500.00

Zoning Permit Fee Schedule

(1) Zoning Permits:

(a) Principal Residential Structures with certificate of zoning compliance (includes attached additions and garages)	\$400.00
(b) Accessory Residential Structures (includes storage sheds, fences, walls, swimming pools both inground and above ground, unattached garage, satellite dishes, decks etc.)	\$100.00
(c) Principal Non-Residential Structures with certificate of zoning compliance (includes attached structures and buildings)	\$500.00
(d) Accessory Non-Residential Unattached Structures	\$250.00
(e) Signs	\$100.00
(f) Uses or change of Uses of Land or Existing Structures	\$100.00
(g) Certificates of Non-conformity	\$150.00

(2) Other Permits

(a) Driveways	\$100.00
(b) Demolition	\$100.00
(c) Road Openings / Cuts / Bores	\$500.00
(d) Well Permits	\$150.00

For driveway and road opening permits, in addition to the filing, review and administration fees set forth above, the applicant or developer shall individually or jointly be responsible for paying all inspection fees, if any, incurred by the Township.

ZONING PERMIT APPLICATION

LEHMAN TOWNSHIP, PIKE COUNTY, PENNSYLVANIA
193 Municipal Drive, Bushkill, PA 18324
570-588-9365

SECTION 1. PROPERTY LOCATION AND OWNERSHIP INFORMATION:

A. Property Address and Location: _____

B. Landowner and Address: _____

Contact Number: (_____) _____ - _____

Contact Number: (_____) _____ - _____

C. Deed Book: _____ Page: _____ Parcel No. _____

D. Zoning District: _____

SECTION 2. APPLICANT INFORMATION, IF DIFFERENT THAN LANDOWNER:

A. Applicant's Name and Address: _____

Contact Number: (_____) _____ - _____

B. Interest in Property:

☐ Record Owner

☐ Tenant

☐ Option Holder

☐ Buyer Under Agreement of Sale

☐ Other _____

SECTION 3. CONTRACTOR INFORMATION, IF SOMEONE OTHER THAN OWNER IS DOING THE WORK:

A. Contractor's Name and Address: _____

Contact Number: (_____) _____ - _____

B. Insurance Information:

☐ Proof of worker's compensation insurance is attached.

☐ Notarized affidavit verifying no employees is attached.

☐ Proof of general liability insurance is attached.

C. Pennsylvania Contractor Registration No. _____

SECTION 4. PRESENT USE OF PROPERTY:

A. Type of Use:

☐ Vacant Land ☐ Agricultural

☐ Single-Family Dwelling ☐ Two-family Dwelling ☐ Multi-family Dwelling

☐ Commercial ☐ Industrial ☐ Other _____

B. Size and Type of Existing Lot:

Width: _____ Length/Frontage: _____ Acres/Square Feet: _____

Corner Lot: Yes _____ No _____

C. Number of Existing Buildings and Structures on Lot: _____

SECTION 5. PROPOSED USE OF PROPERTY:

A. Type of Work, Structure and Use (check those that are applicable):

Type of Work	Type of Structure	Type of Use
<input type="checkbox"/> New	<input type="checkbox"/> Single-family Dwelling	<input type="checkbox"/> Residential
<input type="checkbox"/> Addition	<input type="checkbox"/> Two-family Dwelling	<input type="checkbox"/> Commercial
<input type="checkbox"/> Repair/Alteration/Change	<input type="checkbox"/> Multi-family Dwelling	<input type="checkbox"/> Industrial
<input type="checkbox"/> Demolition	<input type="checkbox"/> Manufactured Home	<input type="checkbox"/> Agricultural
<input type="checkbox"/> Other _____	<input type="checkbox"/> Accessory Structure <input type="checkbox"/> Fence <input type="checkbox"/> Sign <input type="checkbox"/> Shed <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Garage <input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Non-residential Building	
	<input type="checkbox"/> Other _____	

B. Describe the type of work in detail: _____

C. Site plan. A site plan drawn to scale showing the following must be attached to this application:

- (1) The actual dimensions and shape of the property, including existing and proposed access drives, roads, and streets identifying them by name.
- (2) The location and dimensions of all existing and proposed structures, buildings, signs, parking spaces, access drives, and loading zones, with existing features being clearly distinguished from proposed features.
- (3) The exact size and location of existing and proposed uses of land, with existing uses being clearly distinguished from proposed uses.
- (4) The location of any existing and proposed utilities.
- (5) The location of any water courses and any 100-year floodplain.
- (6) Any other information required by the zoning officer to determine compliance with the zoning ordinance.

FAILURE TO PROVIDE A SITE PLAN WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.

D. Zoning Information. Please complete the following (in feet and inches):

Lot Size (square feet)	
Lot Width (feet)	
Front Yard Setback (include name of street)	
If Corner Lot-Second Front Yard Setback (include name of street)	
Rear Yard Setback	
Side Yard Setback (include direction)	
Side Yard Setback (include direction)	
Building Height	
Number of off-street parking spaces	
Building Coverage (percentage)	
Impervious Coverage (percentage)	

A. Use Information. Check whichever is applicable:

- ☐ Use of structure that has been altered, enlarged or moved
- ☐ Use of vacant land
- ☐ Change in use of land
- ☐ Change in use of building or structure

SECTION 6. OTHER CONSTRUCTION INFORMATION:

A. Type of sewer (attach a copy of the permit or approval):

- ☐ Private Sewer (Permit No. _____ and Date of Issuance: _____)
- ☐ Public Sewage
- ☐ Other: _____

B. Stormwater Management:

Total area in square feet for new construction and impervious surface: _____

C. Start Date: _____ Completion Date: _____

D. Construction Costs: \$ _____

- E. Does the property contain any wetlands, floodplains, flood ways, streams, waterways, bodies of water, and other natural conditions, which impact the use or development of the property (if the answer below is in the affirmative, supporting documentation must be attached to this application):

☐ Yes (Please identify below):

☐ Wetlands (attach wetland delineation)

☐ Floodplain or floodway (attach flood elevation survey)

☐ Stream, waterway, or body of water (must be indicated on site plan with setback)

☐ Other natural condition (please identify: _____)

☐ No

SECTION 7. ACKNOWLEDGEMENTS (read before checking each box):

- ☐ A. This application is being made for a permit to use land or a structure, or construct, alter, or demolish a structure in the location shown on the attached sketch plan. The information and the sketch plan are considered part of this application. Any error, misstatement or misrepresentation of material fact in this application or the location, size or use of land or any building or structure, whether intentional or not, that, if known by the zoning officer at the time of issuance of the zoning permit would result in denial of the application, shall constitute a reason for the issuance of a stop work order and revocation of the zoning permit.
- ☐ B. Any permit issued in connection with the application will become null and void if construction work is not started within 12 months from the date of issuance.
- ☐ C. The landowner and applicant both understand that the zoning officer is relying upon the information in this application regarding the existence or absence of wetlands or other natural conditions on the property, which may affect the ability to utilize and building upon the property.
- ☐ D. The landowner and applicant consent to allowing elected and appointed officials of Lehman Township, including its agents, employees, consultants, contractors, and representatives to enter the property for the purpose of performing inspections and testing necessary to verify the information contained in this application is accurate and to determine compliance with all federal, state, and local township laws, rules, regulations, and ordinances, including zoning, building, property maintenance, sewage, stormwater, land development, etc.

- ☐ E. If this application is for a principal building or an addition to a principal building on a permanent foundation, a current lot survey, performed by a Pennsylvania Professional Land Surveyor ("Surveyor"), shall accompany this application. The survey must have been performed not more than three years before the date of this application. All boundary markers must be of a permanent nature and must be readily visible at the time of the initial zoning inspection. The survey map shall show all property lines and corner markers, the courses and distances along all property lines, adjoining streets and property owners, any existing improvements on or adjacent, all proposed improvements to be constructed on the property, any bodies of water or delineated wetlands, any regulated flood plains, all building setbacks or buffers, and a title identifying the map. The proposed building location must also be staked by a surveyor and upon completion of the foundation and prior to the initiation of any framing, an as-built survey of the foundation shall be prepared by a surveyor and submitted to the zoning officer for approval.

By signing below, the applicant and owner verify that the information contained in this application and the documents attached are true and correct to the best of his/her/their knowledge, information, and belief. The applicant and owner understand that false statements made herein are subject to penalties of 18 Pa. C.S.A. Section 4904 relating to unsworn falsification to authorities. If the application is not signed by the owner, the applicant certifies that the applicant is authorized by the owner to make this application and the applicant agreed to inform the owner of the approval (with conditions if any) or denial of the application.

SIGNATURE OF APPLICANT

DATE

THE LANDOWNER MUST SIGN THIS APPLICATION OR IT WILL BE DEEMED INCOMPLETE AND RETURNED.

SIGNATURE OF LANDOWNER

DATE

*****OFFICIAL USE ONLY*****

Date Received: _____ Fee Paid: _____ Permit No. _____

☐ APPROVED

☐ DENIED

Date: _____

IF APPROVED, THE APPROVAL IS SUBJECT TO THE FOLLOWING CONDITIONS:

IF DENIED (ATTACH DENIAL LETTER):

ZONING OFFICER



Lehman Township Board Of Supervisors

193 Municipal Dr. • Bushkill, Pike County, PA 18324 • (570) 588-9365 • Fax (570) 588-1864

To All Contractors and Private Individuals:

Effective August 31, 1993, the following is needed before a Building Permit will be issued:

- 1) All contractors with employees must submit a completed Workers' Compensation Information Form and a current Workers' Compensation Insurance Certificate with the following information on it:
 - a) A notation to the effect that the insurer must notify the Township of the expiration or cancellation of any such policy of insurance within three (3) working days.
 - b) The certificate must list Lehman Township as a "certificate holder".
- 2) If the applicant is a private individual, that person does not need proof of insurance.

NOTE: Any violation of the above shall result in the issuing of a "stop work order" until compliance has been obtained.

Stanley Whittaker, Lehman Township Zoning Officer

Workers' Compensation Insurance Coverage Information
(attach to building permit application).

A. The applicant is

A contractor within the meaning of the Pennsylvania Workers' Compensation Law

☐ Yes

☐ No

If the answer is "Yes", complete Section B and C below as appropriate.

B. Insurance Information

Name of Applicant _____

Federal or State Employer Identification No. _____

Applicant is a qualified self-insurer for Workers' Compensation.

☐ *Certificate attached*

Name of Workers' Compensation Insurer _____

Workers' Compensation Insurance Policy No. _____

☐ *Certificate attached*

Policy Expiration Date _____

C. Exemption

Complete Section C if the applicant is a contractor claiming exemption from providing Workers' Compensation Insurance

The undersigned swears or affirms that he/she is not required to provide Workers' Compensation insurance under the provisions of Pennsylvania Workers' Compensation Law for one of the following reasons, as indicated:

☐ Contractor with no employees. Contractor prohibited by law from employing any individual to perform work pursuant to this building permit unless contractor provides proof of insurance to the Township.

☐ Religious exemption under the Workers' Compensation Law.

Subscribed and sworn to before me this
_____ day of _____, 20____

(Signature of Notary Public)

My commission expires: _____

(Seal)

Signature of applicant _____

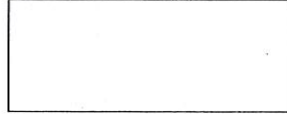
Address _____

County of _____

Municipality of _____

SKETCH PLAN

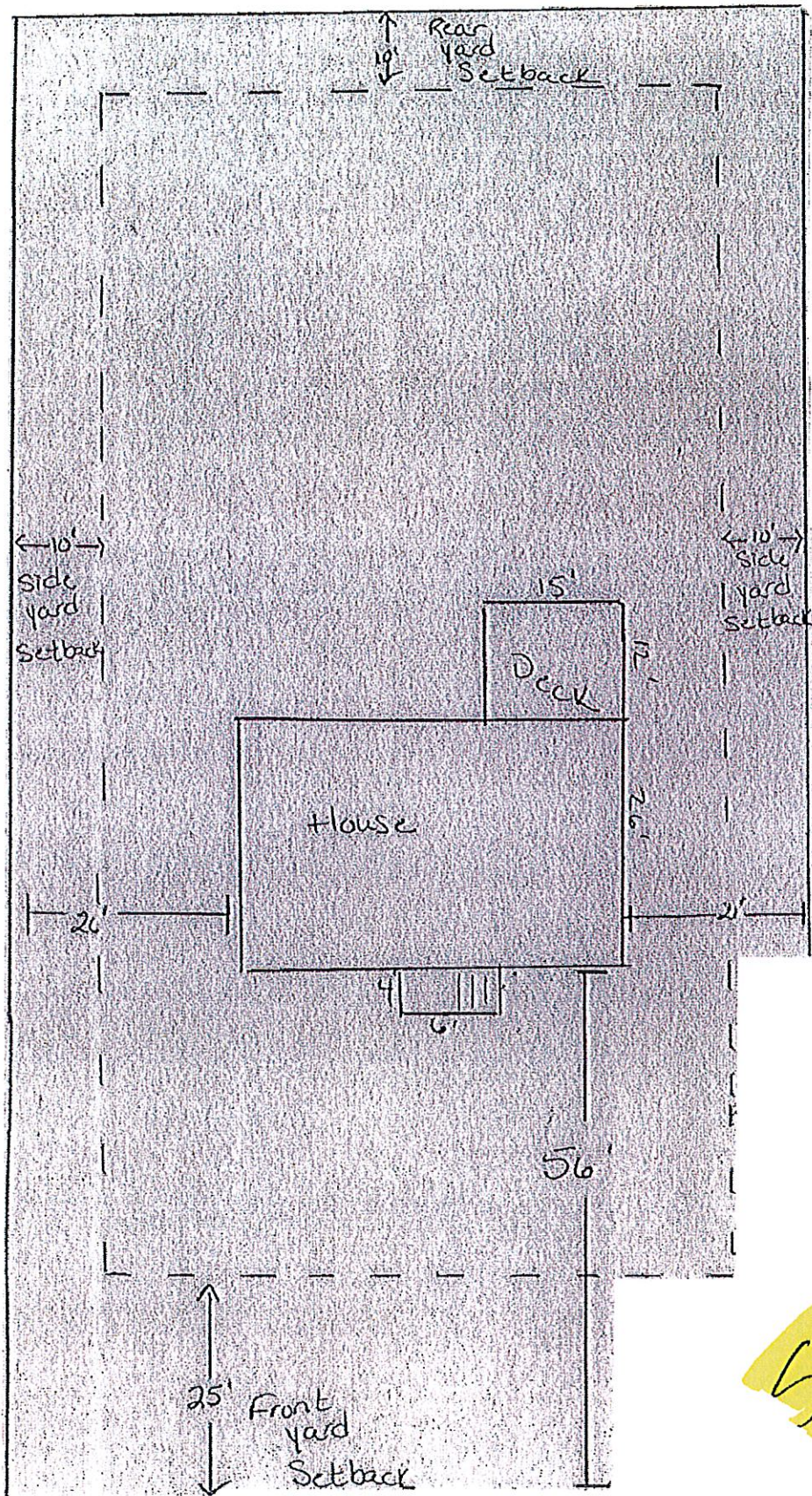
Indicate North



I will have the structure built and located in accordance with the dimensions indicated above.

Date: _____

Signature of Applicant



Sample
Only -
Verify Setbacks