

BOROUGH OF HELLERTOWN

685 Main St., Hellertown PA 18055
Phone: 610-838-7041 Fax: 610-838-0500
www.hellertownborough.org

ZONING PERMIT

Please Print Legibly And Fill Out Form Completely

Property Owner Name: Phone:
Property Address: Cell:
City: State: Zip: Email:

Current Business Name: Phone:
Zoning District:

Applicant Name: Phone:
Applicant Address: Cell:
City: State: Zip: Email:

Contractor Name: Phone:
Contractor Pa Registration #: Cell:
Contractor Address: Fax:
City: State: Zip: Email:

PROPOSED PROJECT INFORMATION

TYPE OF PROJECT: New Building Accessory Structure Addition Type of Accessory Use: Deck Signage Swimming Pool Other	Description of Proposed Work: Proposed Cost: **Attached Site/Plot Plan Must Be Completed By Applicant**
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OFFICE USE ONLY

Permit #:	Is this use permitted in this district?	Yes	No
Date Issued:	Zoning District Area Regulations		
Permit Fee: \$	Lot Area:	Width:	
Approved By:	Bldg. Area:	Impervious Surface:	
Title:	Front Yard:	Side Yard:	
Date:	Rear Yard:	Parking Spaces Req'd:	

Floodplain Determination:	Is a variance required for this project/use?	Yes	No
Base Flood Elevation:	Have previous variances been granted?	Yes	No
Cost of Improvement:	If yes, when?		
Market Value of Structure	For what?		

PAYMENT Cash Check #