



White Oak Borough

Zoning Permit Application

Date of Application: _____

Property Address: _____

Zoning District: _____

Lot and Block #: _____

Residential: One Family _____ Two or more family _____ number of units _____

Commercial Type: _____
(Ex: Store, Medical Office, Church, Pizza shop)

Proposed Project:

- | | |
|---------------------------------------|--|
| <input type="checkbox"/> Antenna | <input type="checkbox"/> Fence |
| <input type="checkbox"/> Addition ** | <input type="checkbox"/> Garage ** |
| <input type="checkbox"/> Deck** | <input type="checkbox"/> Roof |
| <input type="checkbox"/> Demolition** | <input type="checkbox"/> Shed |
| <input type="checkbox"/> Driveway | <input type="checkbox"/> Swimming Pool |

Other: _____

Be advised that those with ** will also need to submit a Building Permit Application as well.

Cost of Construction: \$ _____

Pool ONLY- Must submit one (1) drawing of proposed pool and copy of the plot (survey), showing the same location of proposed pool.

Type of Pool:

Above Ground In ground

Location- check all that apply:

- Side Yard
 Rear yard

Sheds ONLY- Max size 12x12- Must submit one (1) drawing of proposed shed and copy of the plot (survey), showing the same location of proposed shed. *See ordinance 1371.08*

Location of Shed: **Size of Shed:** _____

- Front Yard
 Side Yard
 Rear Yard

Fence ONLY- Must submit one (1) drawing of proposed fence and copy of the plot (survey), showing the same location of proposed fence. *See ordinance 1371.19*

Height of Fence: _____

Location- check all that apply:

- Front Yard
 Side Yard
 Rear Yard (Please note corner lot does not have a rear yard)

Type- check all that apply:

- | | |
|-------------------------------------|--------------------------------|
| <input type="checkbox"/> Chain Link | <input type="checkbox"/> Metal |
| <input type="checkbox"/> Split Rail | <input type="checkbox"/> Wood |
| <input type="checkbox"/> Picket | <input type="checkbox"/> Vinyl |

Antenna see ordinance article 1371.00
 Driveway, Demolition, Roof– See Zoning officer for complete requirements.

Identification – To be completed by all

	Name	Address	Phone
Owner:			
Contractor, Architect or Engineer			

PA Contractor Number:

A copy of the contractor's workers' compensation certificate must be filed with this office in order to receive a Zoning Permit
 A copy of the contractor's Pennsylvania Home Improvement Contractor License must be filed with this office in order to receive a Building Permit.

I hereby certify that the proposed work is authorized by the owner of record and that I am said owner or that I have been authorized by the owner to make this application as his authorized agent and I/we agree to abide by the Zoning Code of the Borough of White Oak and to conform to all applicable ordinances, regulations, and laws of the Municipality and the state of Pennsylvania.

Signature of applicant: _____

Date: _____

Payable to White Oak Borough- All fees must be paid at the White Oak Borough Building.

DO NOT WRITE BELOW THIS LINE

<p>Permit Fees</p> <p>Zoning Permit Fee: \$ _____</p> <p>PA State Permit Surcharge: \$ _____</p> <p style="padding-left: 40px;">Payable to: White Oak Borough</p> <p style="text-align: right;">Total \$ _____</p> <p>Check Number: _____ Cash _____</p>	<p>Zoning Information</p> <p>Zoning District: _____</p> <p>Zoning Set Backs:</p> <p>Front: _____</p> <p>Side Left: _____</p> <p>Side Right: _____</p> <p>Back: _____</p>
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Approve By: _____
 Code Enforcement / Zoning Officer

Permit Number: _____ Date: _____