



# CITY OF HAZLETON

40 North Church Street  
Hazleton, Pennsylvania  
570) 459-4925

**CODE ENFORCEMENT  
OFFICE USE ONLY**

Appl. #: ZA/ \_\_\_\_\_  
Date Issued: \_\_\_\_\_  
By: \_\_\_\_\_  
Date Returned: \_\_\_\_\_  
Status: \_\_\_\_\_

**FEES:**

- Comm. / Ind. Use \$ 125.00
- Residential Use \$ 75.00

## ZONING PERMIT APPLICATION

**[A Zoning Permit Application must be filed prior to the Building Permit Application]**

*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 that follow are considered part of this application. Any application which does not contain complete information, or all required documents will be returned to the applicant as incomplete and the applicant will be directed to provide the specific additional information needed for review. Pursuant to Zoning Ordinance, 2021-9, Chapter 11, section 1103 C., the Hazleton City Zoning Officer has thirty (30) days to review and make a decision on your zoning application. Any information, data or documents set forth in the application which are not true and correct, or which contain false, improper, or erroneous information, data, or documents, may result in revocation of any previously issued Zoning Permit or Approval.*

### SECTION 1. PROPERTY LOCATION AND OWNERSHIP INFORMATION:

A. Property Address and Location: \_\_\_\_\_  
\_\_\_\_\_

B. Deed Owner and Address: \_\_\_\_\_  
\_\_\_\_\_

• Contact Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

### SECTION 2. APPLICANT INFORMATION, IF DIFFERENT THAN OWNER:

A. Applicant's Name and Address: \_\_\_\_\_  
\_\_\_\_\_

• Contact Number: (     ) \_\_\_\_\_ - \_\_\_\_\_

B. Interest in Property:

- Record Owner     Buyer Under Agreement of Sale     Tenant with lease  
 Other \_\_\_\_\_     Option Holder

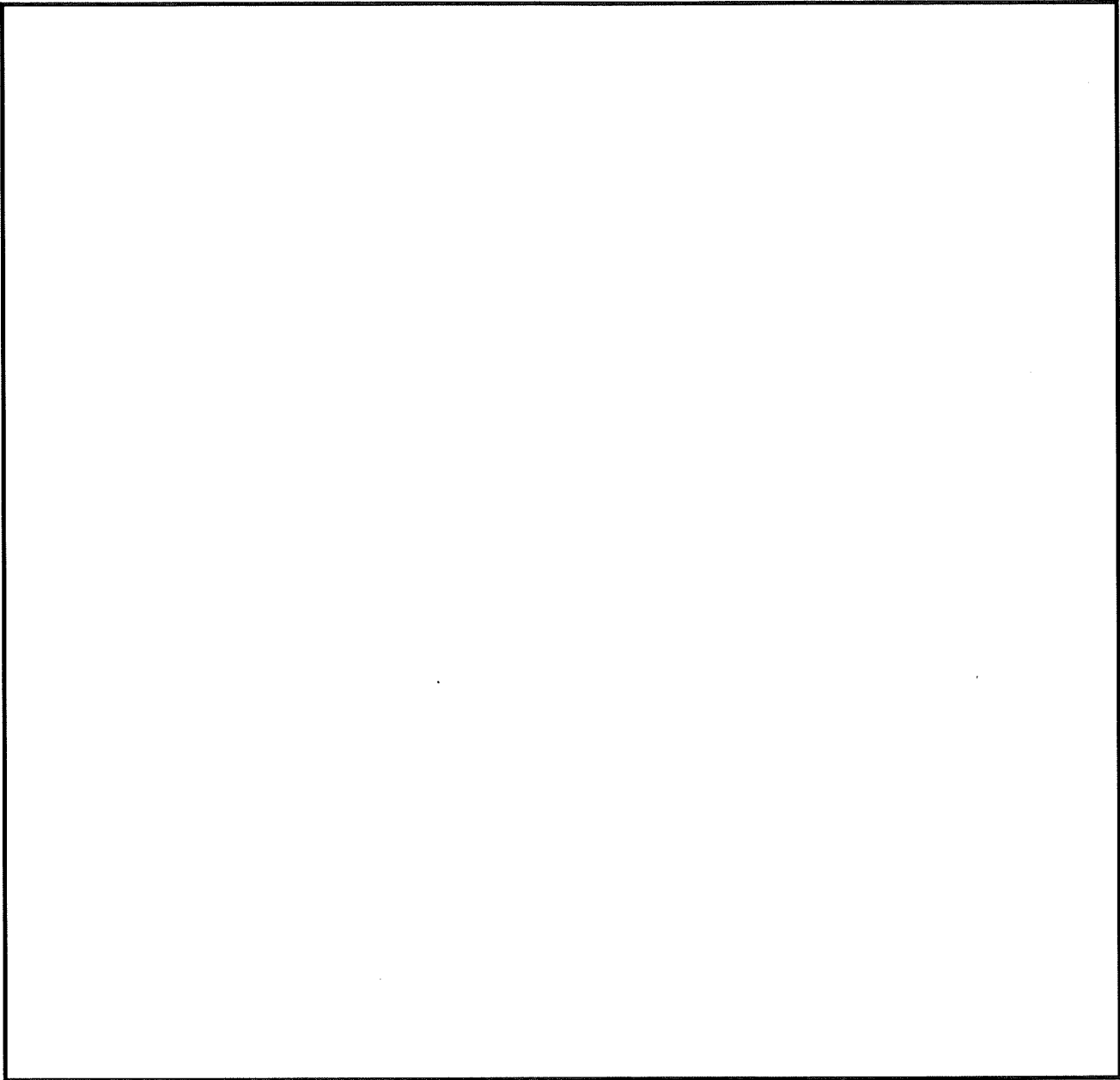
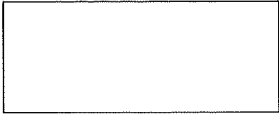
C. Rental Property \_\_\_ yes \_\_\_ no  
Current number of units \_\_\_\_\_ Proposed number of units \_\_\_\_\_  
Rental registration up to date \_\_\_ Yes \_\_\_ No

D. Drivers license Attached \_\_\_ yes \_\_\_ no



**SKETCH PLAN**

**Indicate North**



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

**Date:** \_\_\_\_\_

\_\_\_\_\_ **Signature of Applicant**

D. Zoning Information. Please complete the following (if not applicable indicate with n/a):

	Current	Proposed
<b>Zoning District</b>		
<b>Lot Size (sq. ft.)</b>		
<b>Lot Width (ft.)</b>		
<b>Lot Depth (ft.)</b>		
<b>Building Setback: (ft.)</b> <i>Front Yard (Street Name)</i> <i>*(Corner Lot) Other Front Yard</i> <i>Rear Yard</i> <i>Side Yard (left side from front)</i> <i>Side Yard (right side from front)</i>		
<b>Building Height (ft.)</b>		
<b>Number of off-street parking spaces</b>		
<b>Lot Coverage (%)</b>		

E. 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  
 No change in use of property

Please explain: \_\_\_\_\_

Size of lot area to be used: \_\_\_\_\_ (sq. ft.)

**SECTION 6. DOWNTOWN OVERLAY DISTRICT:**

A. Is the property located within the Downtown Overlay District (see map located in code office). The district boundary encompasses both sides of Broad Street between Locust and Poplar Streets, both sides of Church Street between Broad and Maple Streets, both sides of Laurel Street between Broad and Maple Streets; and both sides of Wyoming Street between Broad and Holly Streets.

- Yes  
 No

B. Will the proposed scope of work impact the front exterior of the building.  Yes

- No

If you answered yes to both A. and B., you must obtain a Certificate of Appropriateness (COA) and include it with your application.

**SECTION 7. OTHER CONSTRUCTION INFORMATION:**

A. Has a sewer and water connection permit been obtained?

- Yes
- No
- Not applicable-existing connection

**If a permit has been obtained, attach a copy to this application.**

B. Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

C. Construction Costs: \$ \_\_\_\_\_

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 OWNER

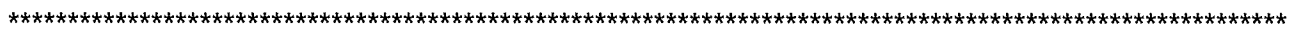
\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE



**OFFICIAL USE ONLY**



Date Received: \_\_\_\_\_ Fee Paid: \_\_\_\_\_

APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20 \_\_\_\_\_.

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
ZONING OFFICER

**IF THE ZONING PERMIT APPLICATION IS DENIED, A COPY OF THE DENIAL LETTER MUST BE ATTACHED.**