,		
Permit	No.	

## Lawrence Township PO Box 508 Clearfield Pa 16830 814-765-0176/Fax 814-765-5258

## **Zoning Permit Application**

Date:Pi		roperty Tax Map #		
Plus \$2.50 per thousand Cost of	\$40.00			
Work Site Address:				
Owner:	Phone:			
Owner Address: Contractor:	(city)	(state) Phone:	(zip)	
Contractor Address:	(city)			
Contractors Insurance Attached Yes	No (city)	(state)	(zip)	
Site Plan Attached Yes No	N/A			
Zoning District Zoning	Setbacks Meet	Yes No	N/A	
TYPE OF WORK				
( ) Commercial ( ) Illegal Building	( ) Legal Building	( ) Residential		
( ) New Building ( ) Addition ( ) Demolition	n ( ) Alterati	ion ( ) Change of Occ	upancy	
( ) Roofing ( ) Siding ( ) Fencing ( ) Sign	ı ( ) Pool	( ) Occupancy	( ) Other	
Description of Work:				
Notice to Taxpayers Under the provisions of Township Ordinance No. your contemplated alteration or new construction the Building Inspector and must be filed with the secured.	1. An application	for exemption may l	be secured from	
I hereby certify that the proposed work is author authorized to make this application as his/her autlaws of this jurisdiction.	•			
Signature		Date		
Approved by Code/Zoning Officer		<u>Date</u>		