

PERMIT NO. \_\_\_\_\_

**BOROUGH OF ROYALTON**  
**101 NORTHUMBERLAND STREET**  
**MIDDLETOWN, PA 17057**  
**PHONE: 717-944-4831      FAX: 717-944-2469**

**ZONING/ACCESSORY STRUCTURE PERMIT APPLICATION**

<b>LOCATION OF PROPERTY</b>		<b>TAX PARCEL NO.</b>	
<b>ADDRESS:</b>			
<b>WORK PROPOSED</b>			
<b>TYPE OF IMPROVEMENT</b>		<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL
<input type="checkbox"/> FENCE		USE GROUP: _____ CONSTRUCTION TYPE _____	
<input type="checkbox"/> SHED			
<input type="checkbox"/> SIGN		DESCRIPTION: A concise, specific statement of proposed work or change. All new	
<input type="checkbox"/> OTHER ACCESSORY STRUCTURE		structures, additions and alterations require three (3) complete sets	
<input type="checkbox"/> RELOCATE STRUCTURE		of scaled plans and specifications for all building systems; the size and	
<input type="checkbox"/> PARKING LOT/SPACE		complexity of which may also require greater detail and calculations.	
<input type="checkbox"/> PATIO		_____	
<input type="checkbox"/> DRIVEWAY (REQUIRE HOP)		_____	
<input type="checkbox"/> OTHER		_____	
<input type="checkbox"/> DEMOLITION		_____	
<b>DECLARED FAIR MARKET VALUE</b>		<b>EXTERIOR DIMENSIONS:</b>	
\$ _____		HEIGHT IN FEET _____	SQUARE FOOTAGE (BUILDING FOOTPRINT)
_____			
<b>IDENTIFICATION:</b>	<b>NAME</b>	<b>COMPLETE ADDRESS</b>	<b>PHONE &amp; EMAIL ADDRESS</b>
<b>OWNER</b>	_____	_____	_____
_____			
<b>ARCHITECT/ENGINEER</b>			
_____			
_____			
<b>CONTRACTOR</b>			
_____			
_____			

**AFFIDAVIT:** I, hereby, authorize and certify that I am the owner in fee or the authorized agent of the owner in fee of the property upon which the work authorized by the permit sought will be performed. I further certify that all work will be performed in accordance with all applicable laws and regulations of the United State of America, the Commonwealth of Pennsylvania and Royalton Borough and that all information submitted is true and correct. I understand that false statements are subject to the penalties of 18 PA CS § 4904 Unsworn falsification to authorities.

Print name \_\_\_\_\_ Owner or Agent \_\_\_\_\_

Signature of Owner of Authorized Agent \_\_\_\_\_ Date \_\_\_\_\_

**IMPERVIOUS COVERAGE**

Provide the Square Footage for each of the following Site Elements Present (if not applicable mark N/A):

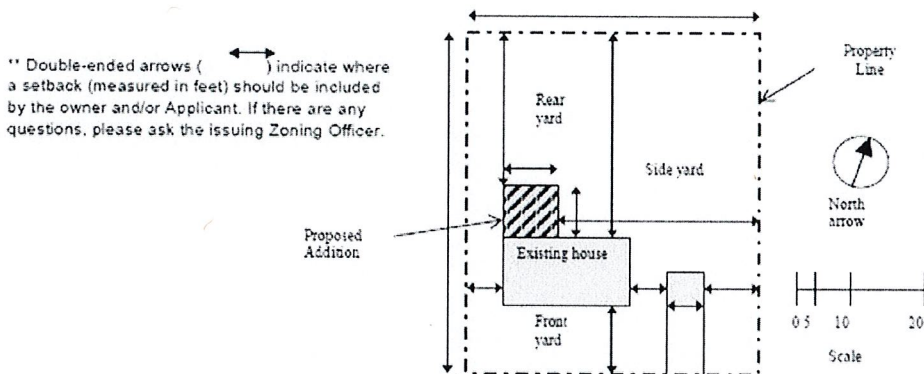
House: \_\_\_\_\_ + Deck: \_\_\_\_\_ + Driveway: \_\_\_\_\_ + Private Sidewalks/Patio/Pavers: \_\_\_\_\_  
 Pool/Hot Tub: \_\_\_\_\_ + Detached Garage: \_\_\_\_\_ + All Storage Building: \_\_\_\_\_ + Other \_\_\_\_\_  
 = Impervious Coverage Square Footage: \_\_\_\_\_ + Lot Square Footage: \_\_\_\_\_  
 = Percentage of Impervious Coverage: \_\_\_\_\_

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

**SITE PLAN**

Attach a Fully Dimensioned and/or Scaled Site Plan Indicating All Existing Site Conditions & Proposed Improvements in Relation to each other & All Existing Public & Private Roads, Right-of-Ways, Easements, Wetlands, Floodplains, Lot Lines and Setbacks.

Example Map



**SITE INFORMATION**

Zoning District: \_\_\_\_\_ Current Use: \_\_\_\_\_

Proposed: \_\_\_\_\_ New Use  Same Use  Conversion to Conforming

Current Number of Off-Street Parking Spaces: \_\_\_\_\_ Proposed Number of Off-Street Parking Spaces: \_\_\_\_\_

Setbacks Required Provided Front  
(check)

North \_\_\_\_\_ Site within an Identified Flood Prone Area: Yes  No  Unsure

East \_\_\_\_\_

South \_\_\_\_\_

West \_\_\_\_\_

**ROYALTON BOROUGH ASSUMES NO RESPONSIBILITY FOR ANY MISREPRESENTATION OR OMISSION BY THE APPLICANT.**

**OFFICE USE**

Zoning Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Flood Plain Administrator Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Permit Fee \$45.00

Payment type: \_\_\_\_\_ Amount: \_\_\_\_\_ Tracking# \_\_\_\_\_