



TOWNSHIP OF CRANBERRY
RESIDENTIAL ACCESSORY
ZONING PERMIT
TYPE II

1. NAME OF PROPERTY OWNER: _____

STREET NUMBER: _____ STREET NAME: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

1. NAME OF APPLICANT: _____ [] CHECK IF SAME AS OWNER

STREET NUMBER: _____ STREET NAME: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ FAX: _____

1. LOCATION- WHERE WORK WILL BE COMPLETED:

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

4. a. PROPOSED USE(S) AS DEFINED IN CHAPTER 27, ZONING ORDINANCE OF CRANBERRY TOWNSHIP. PLEASE CHECK THOSE THAT APPLY:

[] DECK (LESS THAN 30" FROM GRADE LEVEL (1050)

[] DETACHED STRUCTURE: (1150)

[] SHED (UNDER 1000 SQ. FT.) (1050)

[] CARPORT (1150)

[] GARAGE (UNDER 1000 SQ. FT.) (1150)

[] GREENHOUSE (1150)

b. SIZE _____ AND/OR SQUARE FOOTAGE _____ OF STRUCTURE

5. I HEREBY ACKNOWLEDGE THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT, AND HEREBY AGREE THAT ALL APPLICABLE PROVISIONS OF THE CRANBERRY TOWNSHIP CODES SHALL BE COMPLIED WITH.

DATE: _____ SIGNATURE: _____ (PRINTED FORMS ONLY)

EMAIL ADDRESS: _____

FOR TOWNSHIP USE ONLY - PLEASE DO NOT WRITE BELOW THIS LINE

AP #: _____ MAP & PARCEL #: _____ NAICS: _____

PERMITTED ZONING USE: _____ ZONING DISTRICT: _____ FEE \$ _____

BUILDING CODE OFFICIAL SIGNATURE OF APPROVAL: _____ DATE: _____