

BOROUGH OF LANGHORNE

BUCKS COUNTY, PENNSYLVANIA APPLICATION FOR ZONING PERMIT

APPLICANT INFORMATION

DATE: _____

NAME _____

E-MAIL ADDRESS: _____

HOME ADDRESS _____

PHONE (DAY) (_____) _____ (NIGHT) (_____) _____

PROPOSED USE: _____

This Application must be accompanied by a copy of the plot plan, drawn to scale, showing the following information:

- Lot size, location of all existing and proposed structures, dimensions of structures and of boundary lines. (A survey may be required)
- Driveway dimensions and impervious surface calculations, including the total percentage of impervious coverage. (Stone driveways are considered impervious, pool water areas are not).
- Locations of any streams or other bodies of water or deemed easements.

DIAGRAM MUST BE SIGNED AND DATED BY THE PERSON WHO PREPARED IT. IF UPON INSPECTION, THIS INFORMATION IS FOUND TO BE INCORRECT, THIS PERMIT WILL BE REVOKED, AND THE PERSONS INVOLVED WILL BE CONSIDERED IN VIOLATION OF THE ZONING ORDINANCE.

EMPLOYEES: _____

SQUARE FEET OF BUILDING AREA TO BE USED: _____

OFF STREET PARKING AVAILABLE: _____

114 East Maple Avenue
Langhorne, PA 19047



Phone: 215-757-3768
Fax: 215-757-1272

SIGNS PROPOSED: _____

HISTORY OF BUILDING USE: _____

DATE: _____

SIGNATURE OF APPLICANT OR AGENT: _____

Borough Use Only

Zoning District: _____ Tax Map Parcel Number(s): _____

Current Use: _____

Conditions of Approval: _____

Approval for use as: _____

Denied: _____

Date: _____ Code Enforcement Officer: _____