

EDEN TOWNSHIP

489 Stony Hill Road, Quarryville, Pa. 17566

Phone: (717)786-7915 Fax: (717)786-6896

Property Owner: _____ **Date:** _____
Street Address: _____
Post Office & Zip: _____ **Phone ()** _____

Applicant (if other than owner) _____
Address of Applicant _____
Phone No. of Applicant _____

Permit requested: Structure ____ Driveway ____ Encroachment ____

Structure: Permitted Use ____ Special Exception ____ Conditional Use ____ Variance ____
Location/Address _____
Tax Parcel Number: _____
Proposed Use: _____
Use: Primary ____, Secondary ____, Other ____
Size: Width ____, Length ____, Height ____, No. Stories _____
Type of Construction: New Bldg ____, Addition ____, Farm Bldg ____, Pool ____, Shed ____
Remodeling ____, Commercial ____
Type of Material Frame ____, Brick ____, Block ____, Other ____
Utilities: Water _____ Sewage permit no. _____
Cost of Construction _____ Date of Completion _____
Building Code required: Yes ____ No ____
Date submitted to Code _____ Date returned _____
Permit Fee: _____ Inspection Fee: _____ U&O issue date _____
SWM Exemption fee _____ SWM fees _____
Total collected: _____ Check# _____

Driveway Entrance: Must conform to the guidelines of the Zoning Ordinance, Sec. #308,309, and 310 as they may apply.

Road to be accessed from: _____
Starting Date: _____ Completion Date: _____
Application No: _____ Permit Fee: _____ Check # _____

Encroachment of Twp Right of Way: Any disturbance of Township Right of Way or Road surface by digging, cutting, paving, plowing, building of structure, filling, blocking, etc. Township Right of Way extends 16.5 feet from the center of the road in both directions.

Purpose of encroachment: _____
Road affected: _____ Road Masters conditions (attach)
Starting Date: _____ Completion Date: _____ Inspection Date _____
Permit Fee: _____ Check # _____

One Call: Property owner and or his contractor is responsible to contact One Call before digging
Phone: (800) 242-1776

IF THERE IS ANY CHANGE TO ABOVE INFORMATION YOU MUST NOTIFY THE ZONING OFFICER BEFORE PROCEEDING.

Applicants Signature: _____ Date: _____

Zoning Officer Signature: _____ Date: _____

Total Fees collected _____