Application for ZONING PERMIT – DRIVEWAYS
West Hanover Township, Dauphin County, Pennsylvania

Estimated Cost of Proposed Work: $_____ Ordinance ref: _____ Zoning District: _____
Parcel Number: _____

1. Address of Project: _____

2. Name of Property Owner: _____

   Address: _____

   Home Phone Number: _____ Business Phone Number: _____

3. Name of Applicant: _____

   Address: _____

4. Name of Contractor: _____

   Address: _____ Phone No. _____

5. Existing Use of Property: _____ Lot size: _____sq. ft.

6. On-site Environmental Features: (check all that apply) Wetlands _____, Streams _____, Lakes & Ponds _____, Floodplain _____, Steep Slopes (>25%) _____, None ____.
   (Show on site plan)

7. Proposed Work: Existing Driveway ____ Asphalt ___ Concrete ___ Other _____
   New Driveway (Show on site plan) _____

8. Sight Distance: Left _____ft ±_____% Right _____ft ±_____%

9. Dimensions: Required – 3' from property line Actual distance - _____
   - 5' from catchbasin - _____
   Width: _____ Length: _____
   Profile from road to garage: (Show on back)

10. Street stormwater unobstructed? _____ Pipe required at street shoulder? _____

The undersigned is hereby applying for a zoning permit for a driveway; said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct. The applicant is required, in addition to the information requested on this form to submit a Plot Plan showing actual dimensions and shape of the lot, exact sizes and locations of existing and proposed buildings on the lot. All other Ordinance requirements not identified above also apply and must be met.

_____ _____ _____
Applicants Signature Print name Date

Section 195-184.C(1) states this permit is valid for 12 months from issuance.