APPLICATION IS NOT COMPLETE IF ANY INFORMATION IS MISSING FROM THIS APPLICATION BY APPLICANT

Official Use ONLY:
Application Received: ____/____/____
Twp. Minimum Permit Fee $5.00/$1K due
Or Min $35.00 fee which ever is greater
Tax Parcel: 68-

Official Use Only:
Zoning Administrator comments:
Zoning Permit #: _____
Issuance/Approved date: ____/____/____
Deny date: ____/____/____

Application for ZONING PERMIT – FORESTRY ACTIVITIES

7171 Allentown Boulevard, Harrisburg, Pa. 17112 – 717-540-6075
West Hanover Township, Dauphin County, Pennsylvania

E. C. Cost $ _____, Ordinance Ref: Chapter 195-103.Q, 173-29, & 168, Zoning District: _____

1. Address of Project: _____

2. Name of Property Owner/Address: _____

   Home Phone Number: _____, Business: _____, Fax: _____, Email: _____

3. Name of Applicant/Address: _____

   Home Phone Number: _____, Business: _____, Fax: _____, Email: _____

4. Name of Contractor/Address: _____

   Home Phone Number: _____, Business: _____, Fax: _____, Email: _____

5. Existing use of property: _____, Lot size: _____sq. ft. (1 acres = 43,560 sq.ft.)

6. On-site Environmental Features: (check all that apply) Wetlands _____, Streams _____, Lakes & Ponds _____, Floodplain _____, Steep Slopes (>25%) _____, (Show ALL features on site plan), None ____.
7. Proposed Work: (Check ALL that apply to this application)
   ___Clearing and Grubbing ___Area of disturbance _____ sq. ft.
   ___Cutting and Filling ___Vegetation cleanout
   ___New Construction ___Sediment/debris cleanout
   ___Harvesting ___Other (Describe on separate sheet)
8. Stormwater Control Plan approved by Township Engineer? _____ yes (attach memo) _____ no
9. Stormwater Plan recorded _____ yes _____ no ____
10. Operation & Maintenance agreement recorded ____ yes ____no
11. E&S measures (Submit Site Plan, & DCCD letter) ___ yes ____ no, DCCD approval granted, ___ yes ____ no
12. Subdivision / Land Development plan recorded: _____ yes ____ no
13. Route of Trucks to closest State Road in Route: _____
14. Roadmaster approval: _____ yes ____ no (Mr. Harold Harman – hharman@westhanover.com – 717- 652-1054)
15. Area of Disturbance must be identified by ____ Flags or ____ Snow fence
16. Brief description of proposed work to be done, Include site plan: attach separate sheet(s).

The undersigned (Owner/Applicant below) is hereby applying for a zoning permit to be issued on the basis of the information contained within this application and supporting approved drawings. The Owner/Applicant hereby certifies that all information and attachments to this application are true and correct. The Owner/Applicant is responsible for all Plan review fees and recording fees necessary for this permit. The issuance or denial of this permit may be appealed to the Zoning Hearing Board through the normal application process.

Any oversight or omission during the review process is not a waiver of any of the requirements of applicable Zoning and or Subdivision & Land Development Ordinances of West Hanover Township and does not relieve the Applicant, Developer and or Property Owner from complying with them.

_____	_____	_____
Legal Property Owner Signature	Print name	Date
_____	_____	_____
Applicants Signature	Print name	Date

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