

City of Washington

DEPARTMENT OF CODE ENFORCEMENT
55 West Maiden Street Washington, PA. 15301



724-223-4203

Zoning Permit

DATE: _____ PERMIT NUMBER: _____

APPLICANT: _____

ADDRESS: _____

RESIDENTIAL___ COMMERCIAL___ INDUSTRIAL___ OTHER___

PROPOSED USE: _____ ZONING DISTRICT: _____

NUMBER OF UNITS: _____ DUMPSTER: _____

CONTRACTOR: _____

LOCATION OF PROJECT: _____

ESTIMATED COSTS: _____ PERMIT FEE: _____

I hereby certify that I am the owner of the named property, or have the authorization by the owner to make application as the authorized agent and I agree to conform to the Ordinances and Zoning Codes of the City of Washington. This permit conveys NO right to occupy any street, alley, or sidewalk, or any part thereof either temporary or permanently. Encroachment on public property not specifically permitted under the UCC or the ICC MUST be approved by this jurisdiction. Street or alley grades as well as depth and location of public sewers may be obtained from the public utility companies. The issuance of this permit does not release the applicant from the conditions of any applicable zoning or subdivision restrictions.

VALIDATION:

Total Cost of Construction: _____

Municipal Fee: _____

TOTALS: _____

ZONING OFFICIAL: _____