

**Stonycreek Township
1610 Bedford Street
Johnstown, Pa. 15902
(814) 266-3111 Fax (814) 266-4883
Building /Zoning Permit Application**

Twp. Permit No. _____
Date: _____
Application Fee: _____

U.C.C. Review Yes/No
Permit No. _____
C.O.G. Request No. _____

Tax Map # _____

Applicant/Contractor:

Prior to a Building /Zoning Permit being issued a review of the Zoning Ordinance for Stonycreek Twp. will be conducted for all proposed projects. The Zoning Officer is charged with the responsibility of administering and enforcing Chapter 155 the Zoning Ordinance. After a Zoning review and approval is completed the proposed project may require additional plan review by Cambria-Somerset Council of Governments Regional Code Agency.

A Building Permit will be required for any new construction, additions, renovations, alterations, repairs/replacement, and demolition, installations of swimming pool and change of occupancy.

Cambria-Somerset COG Regional Code Agency is charged with the responsibility of administering and enforcing the Pennsylvania Uniform Construction Code (UCC) for Stonycreek Twp. in an equal and efficient manner.

As such, it is your responsibility to contact Cambria-Somerset Council of Governments Regional Code Agency to determine whether your project requires a building/construction permit.

They are available to help you with the process and review your plans.

Cambria-Somerset Council of Governments Regional Code Agency

1716 Forest Hills Drive-Suite1, Windber, Pa. 15963 (814) 266-3070 Fax (814) 266-5604

Application for Building Permit/Zoning Permit

The undersigned hereby applies for a building permit and states the following.

Address of building site: _____

Owners of building site: _____ Phone No. () _____

Contractor: _____ Phone No. () _____

Zoning District:

R-1 Residential R-2 Residential R-3 Residential Commercial Light Manufacturing

Present Use of Building Site: _____ Proposed Use of Building: _____

Lot Dimension: _____ Lot Area: _____ Building Height: _____ Flood Plain Zone: _____

Percentage of Lot Coverage: _____ (The percentage of the lot area covered by the building area)

Type of Request:

New Construction: Adding or Remodeling: Repair or Replacement: Change in Use:

Description of Construction: _____

Cost of Construction: _____ Construction to Begin: _____

Plat Plan

All uses of property shall be accompanied by a site plan to indicate the following:

- The size and shape of the property, including property line dimensions, corners, easements, and right-of-way.
- The size, shape, height, area and location of all principal and accessory buildings.
- Dimensions from all buildings to adjacent property lines shall be indicated
- Adjacent street, dwelling locations, alterations, accessory structures (pools, sheds, fence, etc.) and the distance in feet to the property lines.

Plat Plan

Yard Setbacks:

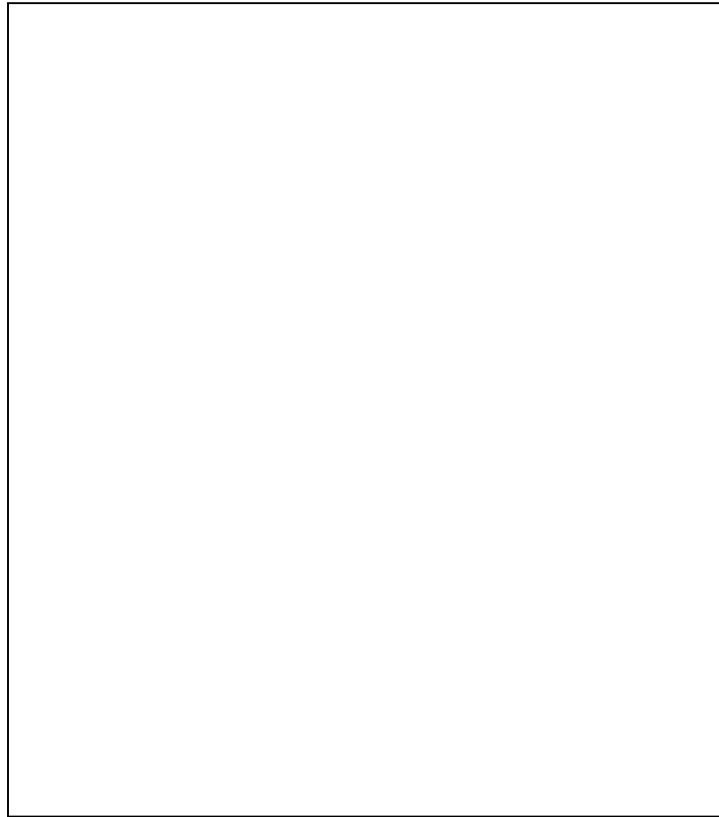
The line within a property defining the required minimum distance between any building and the adjacent right-of-way or property line.
Please indicate yard setback distances on site plan.

Front Yard: _____ Side Yard (1): _____ Side Yard (2): _____ Rear Yard: _____

Interior Lot:

Corner Lot:

Front Yard Setback



Side Yard Setback

Side Yard Setback

Rear Yard Setback

Applicant understands that if the application violates the provisions of the Stonycreek Township Zoning Ordinance, or if the information set forth in the application is incorrect or varied from the construction, the permit will be revoked.

If your application for the permit has been denied, you have the right of appeal within 30 days to the Zoning Hearing Board of Stonycreek Township upon the payment of _____.

The Zoning Officer is **not** authorized to grant variances and exceptions, which may only be granted after a public hearing by the Zoning Hearing Board.

X _____
Signature of Applicant Address

Telephone Number: _____

Decision of Zoning Officer:

Permit (s) Approved:

Permit (s) Denied:

Reason for Denial:

