

PERMIT APPLICATION  
SIDEWALK / DRIVEWAY / PATIO

TOWNSHIP USE ONLY  
Date Received Stamp

PROPERTY INFORMATION

OWNER(S): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

PERMIT NO.: \_\_\_\_\_  
PERMIT FEE: \$ \_\_\_\_\_  
PA UCC FEE: \$ \_\_\_\_\_  
TOTAL FEES: \$ \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_ PAHIC #: \_\_\_\_\_

CONTACT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

OFFICE PHONE: \_\_\_\_\_ CONTACT'S CELL: \_\_\_\_\_

EMAIL: \_\_\_\_\_

TYPE OF WORK TO BE PERFORMED:  Sidewalk  Patio  Driveway  Other: \_\_\_\_\_

TOTAL SQUARE FEET: \_\_\_\_\_ (width \_\_\_\_\_ length \_\_\_\_\_) TOTAL COST OF PROJECT \$ \_\_\_\_\_

PROJECT DESCRIPTION: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please provide a plot plan of the property showing the location of existing structure(s) and proposed work.

**\*\* TOTAL EXISTING AND PROPOSED IMPERVIOUS COVERAGE ON LOT MUST BE PROVIDED \*\***

Your application will not be reviewed until all the required information has been provided to Schuylkill Township. Fees must be submitted at the time of application.

*I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as the authorized agent and we agree to conform to all applicable laws of this jurisdiction. Construction shall comply with all Schuylkill Township Ordinances and the most current UCC Building Code. This application has been examined by me and to my knowledge and belief is a true and correct application.*

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_ PHONE # \_\_\_\_\_ EMAIL \_\_\_\_\_

---

## IMPERVIOUS SURFACE COVERAGE WORKSHEET

---

Zoning District: \_\_\_\_\_ Water:  onsite  public Sewer:  onsite  public

Total Sq. Feet of Lot: \_\_\_\_\_

1. Sq. Feet of Footprint of Home: \_\_\_\_\_
2. Sq. Feet of Driveway: \_\_\_\_\_
3. Sq. Feet of Shed(s)/Barn(s): \_\_\_\_\_
4. Sq. Feet of Detached Garage: \_\_\_\_\_
5. Sq. Feet of Pool/Hot Tub(s): \_\_\_\_\_
6. Sq. Feet of Sidewalk(s)/Walkway(s): \_\_\_\_\_
7. Sq. Feet of Patios/Porches: \_\_\_\_\_
8. Sq. Feet of Deck(s): \_\_\_\_\_

TOTAL Sq. Feet of Current Impervious Coverage: \_\_\_\_\_ *(total of 1 – 8)*

Sq. Feet of NEW Proposed Impervious Coverage: \_\_\_\_\_

Proposed TOTAL Coverage: \_\_\_\_\_

Has any impervious surface been added to the property since January 1, 2014?  NO  YES

If yes, how many square feet? \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

---

### TOWNSHIP USE ONLY

- TOTAL IMPERVIOUS COVERAGE ALLOWED IN THIS DISTRICT \_\_\_\_\_ %
- TOTAL IMPERVIOUS COVERAGE: \_\_\_\_\_ S.F. \_\_\_\_\_ %
- STORMWATER MANAGEMENT PLANS REQUIRED?  YES  NO
- ZONING HEARING BOARD REQUIRED?  YES  NO
- HISTORICAL COMMISSION REQUIRED?  YES  NO

APPROVED:  YES  NO DATE: \_\_\_\_\_

IF NO, GIVE REASON: \_\_\_\_\_

---

KIMBERLY YOCOM GARCIA [ZONING@SCHUYLKILLTWP.ORG](mailto:ZONING@SCHUYLKILLTWP.ORG)  
ZONING ADMINISTRATION OFFICER