

INSPECTION APPROVED

INSPECTION DISAPPROVED

INSPECTION DATE _____

Code Enforcement/Zoning Officer _____

Date _____

Applicant _____

Date _____

FINAL INSPECTION REQUIRED - CALL TECHNICON ENTERPRISES, INC. II (610) 286-1622

Will be placed: Concrete Block Gravel Bed Concrete Slab 6x6 ties w/stone Concrete Foundation

III.

Shed Type: Prefabricated Built on-site Pole-building

Sq. Ft.: _____ ft.

No. of stories: _____

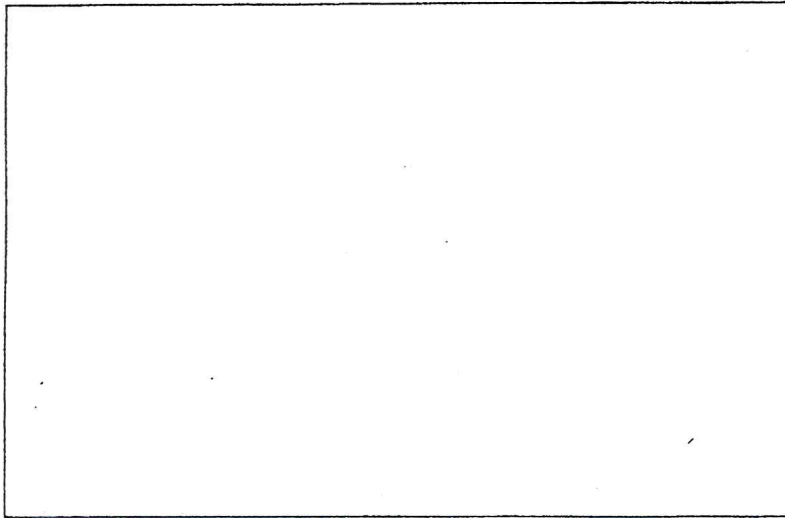
II.

Dimensions:

1. Building Size: Width _____ Length _____ Height _____

NOTE: If applicable, you must show location of on-lot septic system

Front Property Line



Side Property Line

Side Property Line

Rear Property Line

1. Complete the diagram. Show all dimensions from property lines and easements for all existing structures - houses, garage, and proposed building location. Use additional sheet if required.

Municipality _____

Name _____

Phone No. _____

Address _____

Subdivision _____

Estimated Cost _____

Lot No. _____

(for all structures under 1000 sq.ft. only)

Residential Accessory Building / Storage Shed

ZONING PERMIT APPLICATION FACT SHEET

Permit Fee _____

Tax Parcel No. _____

Date _____

Permit No. _____

Zoning District _____

DATE STAMP