

Lehman Township, Luzerne County

1183 Old Route 115 Dallas, PA 18612
Office: (570)-674-7788 / Fax: (570)-674-3541

Flood Plain Management Application

1. SITE LOCATION:

Address: _____

Zoning District: _____

PIN #: _____

2. APPLICANT:

Name: _____

Address: _____

Phone Number: _____ Email: _____

3. OWNER OF PROPERTY:

Name: _____

Address: _____

Phone Number: _____ Email: _____

3. CONTRACTOR:

Name: _____

Address: _____

Phone Number: _____ Email: _____

4. ADDITIONAL REQUIRED PERMITS:

- Zoning Permit Application
- Stormwater Management Application
- Zoning Hearing Board Application
- Building Permit Application
- Conditional Use Application

5. PROPOSED WORK:

6. ESTIMATED TOTAL WORK COST (Including labor, materials, extras, etc.):

7. ARE ALL REQUIRED DRAWINGS AND ALL SUPPORTING MATERIALS AS REQUIRED UNDER ARTICLE 13 OF THE ZONING ORDINANCE ATTACHED?

YES NO

LIST OF SUPPORTING DOCUMENTATION:

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THIS APPLICATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I FURTHER AGREE TO PAY FOR ALL CONSULTING FEES INCURRED BY LEHMAN TOWNSHIP, LUZERNE COUNTY FOR THE REVIEW OF THIS APPLICATION, ACCOMPANYING PLANS AND FOR INSPECTION OF SITE WORK AS SO REQUIRED AND DIRECTED BY LEHMAN TOWNSHIP, LUZERNE COUNTY. SAID PAYMENT, IN FULL, SHALL BE SUBMITTED TO LEHMAN TOWNSHIP, LUZERNE COUNTY WITHIN 30 DAYS FROM BILLING DATE INDICATED UPON THE INVOICE OR NOTICE OF PAYMENT. I FURTHER CERTIFY AND AGREE TO PROVIDE THE OWNERSHIP WITH 'AS BUILT' DRAWINGS OF ALL IMPROVEMENTS PRIOR TO FINAL APPROVAL.

Signature of Applicant

Date

Signature of Owner

Date

THE OWNER'S SIGNATURE OF ALWAYS REQUIRED. FAILURE TO PROVIDE OWNER'S SIGNATURE WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND APPLICATION WILL BE RETURNED TO APPLICANT.

*****FOR TOWNSHIP USE ONLY*****

ZONING OFFICE REVIEW: ___ Approved ___ Denied

Signature of Zoning Officer **Date**

Submission Date: _____ **Application Fee: \$** _____

Payment: _____ **Permit #:** _____

If Permit is denied, note the applicable Sections of the Lehman Township Zoning Ordinance on which the denial is based below:

***A copy of the Lehman Township Zoning Officer's letter of denial shall be attached to this Zoning Permit Application.**
