

**UNION TOWNSHIP  
ZONING PERMIT & APPLICATION**

**DATE:** \_\_\_\_\_ **PERMIT #** \_\_\_\_\_

**APPLICATION IS HEREBY MADE FOR A ZONING PERMIT IN CONFORMITY WITH THE REQUIREMENTS OF THE TOWNSHIP OF UNION TOWNSHIP ZONING ORDINANCE AND ANY ADMENDMENTS THERETO FOR WORK DESCRIBED BELOW:**

**PROPERTY LOCATION:** \_\_\_\_\_

**PARCEL #:** \_\_\_\_\_ **ZONING DISTRICT** \_\_\_\_\_

**OWNER:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

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

**CONTRACTOR:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**DESCRIPTION OF WORK:** \_\_\_\_\_

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

**LOT SIZE:** \_\_\_\_\_ **FRONT SETBACK:** \_\_\_\_\_

**REAR:** \_\_\_\_\_ **SIDE SETBACKS:** \_\_\_\_\_

**FEE PAID:** \_\_\_\_\_ **APPROVAL / DENIED DATE** \_\_\_\_\_

**APPLICANT SIGNATURE:** \_\_\_\_\_

**ZONING OFFICER:** \_\_\_\_\_

3904 FINLEYVILLE ELRAMA ROAD  
FINLEYVILLE, PA 15332  
PHONE (724)348-4250      FAX (724)346-8234