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DEPARTMENT OF CODES & INSPECTIONS

ZONING DISTRICT DESIGNATION

FEE: \$15.00

ADDRESS OF REQUEST: _____

APPLICANT NAME: _____

APPLICANT ADDRESS: _____ PHONE NO: _____

CITY STATE ZIP: _____ FAX NO: _____

ACCURATE INFORMATION MUST BE SUPPLIED IN ORDER TO DETERMINE THE EXACT LOCATION OF THE BUILDING OR PROPERTY IN QUESTION.

PROVIDE A DRAWING DRAWN TO A SCALE OF ONE (1") INCH EQUALS FORTY (40') FEET, ACTUALLY SHOWING THE SHAPE AND DIMENSIONS OF THE LOT TO BE BUILT UPON, THE EXACT SIZE AND LOCATION OF ANY BUILDINGS EXISTING ON THE LOT, THE LINES WITHIN WHICH THE PROPOSED BUILDING OR STRUCTURE SHALL BE ERECTED OR ALTERED, THE EXISTING AND INTENDED USE OF EACH BUILDING OR PART OF A BUILDING, THE NUMBER OF FAMILIES OR DWELLING UNITS THE BUILDING IS DESIGNED TO ACCOMMODATE, AND SUCH INFORMATION AS MAY BE NECESSARY TO DETERMINE COMPLIANCE WITH THIS ORDINANCE AND ALL OTHER PERTINENT INFORMATION.

NOTE: FOR INFORMATIONAL USE ONLY. DOES NOT GRANT APPROVAL TO CONSTRUCT, ALTER, RENOVATE, ADD TO OR OCCUPY ANY STRUCTURE OR PREMISES.

THE UNDERSIGNED HEREBY REPRESENTS THAT, TO THE BEST OF HIS/HER/THEIR KNOWLEDGE AND BELIEF, ALL INFORMATION LISTED ABOVE IS TRUE, CORRECT, AND COMPLETE; AND THAT THE ATTACHED DRAWING CONTAINS THE REQUIRED INFORMATION.

OWNER OR APPLICANT SIGNATURE

DATE

<u>OFFICE USE ONLY</u>	

_____	_____
AUTHORIZED SIGNATURE	DATE