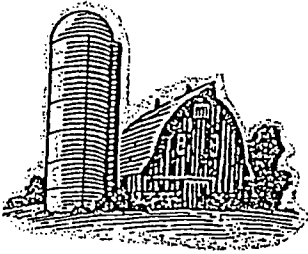
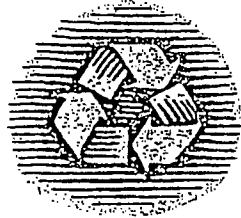


Tax Map I.D.: _____ Subdivision File/Lot #: _____ / _____



Manheim Township, York County
Application for Zoning Permit



APPLICANT TO COMPLETE PAGE 1

Location of Improvement

ADDRESS: _____
BOX STREET TOWN ZIP

ZONING DISTRICT: _____ LOT SIZE: _____ PRINCIPLE USE: _____

Type of Improvement

____ RAZE, DEMOLISH ____ NEW BUILDING ____ ALTERATION
____ REPAIR, REPLACE ____ ADDITION

Building Characteristics

NUMBER OF FLOORS _____
(Including Basement)

OFF STREET PARKING SPACES
ENCLOSED _____ PAVING
OUTDOOR _____ YES
NO

BUILDING AREA, FOOTPRINT _____
(Foundation, porch, deck, etc.)

IF YES, TOTAL AREA
PAVED _____

NUMBER OF BEDROOMS _____

ESTIMATED COST OF ALL IMPROVEMENTS _____
DATE OF COMPLETION _____

Contact Identification

ON SITE WORK PERFORMED BY: ____ OWNER, LESSEE (Skip Contractor Section)
____ CONTRACTOR

CONTRACTOR INFORMATION

Name _____
Address _____
Phone _____

OWNER, LESSEE INFORMATION

Name _____
Address _____
Phone _____

APPLICANT'S SIGNATURE

Print Name _____
Date _____