



**Biglerville Borough Council**  
**33 Musselman Avenue**  
**Biglerville, PA 17307**  
**PH: 717-677-9488 / FAX: 717-677-4027**  
**Email: [office@biglerville.us](mailto:office@biglerville.us) / [www.biglerville.us](http://www.biglerville.us)**

## **ZONING PERMIT INFORMATION**

### **(LAND USE)**

- Zoning Permits are valid for one (1) year from the date they are issued. Work should begin within six (6) months and be completed within twelve (12) months after the date of the permit.
- Zoning permit fees need to be submitted with the permit application.
- All zoning permits will be reviewed and approved by the Code Enforcement Officer, normally this takes about seven (7) days.
- Any rejection will be noted, attached with reasons and requirements.
- Any project requiring water or sewer connections, change or hook-up will need approval from the Borough Council
- A plot plan is required for ALL zoning/ code permits. Plot plans can be obtained in the Mapping Section, Room 206, Second Floor of the new building in Adams County Courthouse
- If you hire persons to perform work after issuance of the zoning permit, you shall furnish proof of Worker's Compensation insurance. Failure to do so will result in a stop-work order. If the hired person does not have Worker's Compensation insurance, a Worker's Compensation Affidavit of Exception form will need to be filled out, signed and notarized.
- If you subcontract any part of your contract, you MUST obtain proof of Worker's Compensation Insurance from the subcontractor. If the subcontractor does not have Worker's Compensation insurance, a Worker's Compensation Affidavit of Exception form will need to be filled out, signed and notarized.
- If you are not employing or hiring any other persons for the project for which you are seeking the building permit you must fill in, sign, and notarize the Worker's Compensation Affidavit of Exception form.

### **SIDEWALK & CURB CONSTRUCTION:**

*(WILL NEED TO OBTAIN THE SIDEWALK PERMIT)*

If your sidewalk is along a state road you must obtain a State Permit- contact PA Dept of Transportation

If your sidewalk is along a borough road you must obtain a Borough Sidewalk Permit- contact the Borough office, Monday through Thursday from 7:30 a.m. until 4:00 p.m. and Friday from 7:30 a.m. until 12 noon.



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## ZONING / LAND USE PERMIT APPLICATION

Date Received: \_\_\_\_\_

Permit No. \_\_\_\_\_

**TO BE FILLED IN BY APPLICANT:**

Application is hereby made for a permit in compliance with the Municipal Zoning Ordinance. The application shall be considered complete when all adequate required documentation is submitted, zoning permit fee has been paid and the application is signed by the applicant. Applicant agrees that such work will be done in accordance with plans and specifications submitted, and that it will comply with all provisions of the Borough Building Permit Ordinance, Zoning Ordinance, and with all other applicable ordinances of Borough, Federal, State and County regulations.

**A Site Sketch Plan/Plot Plan SHALL be submitted with this application** showing the location of the proposed building or use (scale not needed). Show dimensions of all property boundaries comprising the lot/parcel shape, locations, of existing right-of-ways, stream(s), flood plain(s), public roadway(s), private road(s), driveway(s), well(s), septic(s), existing structures, and present usage or occupancy. No changes will be made to this application and/or plot plan without submitting written notification and plans for such changes.

Location of Property: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ Area of Lot/Parcel (sq. ft. or acres): \_\_\_\_\_

**1. Applicant Information**

Name or Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**2. Owner Information (if different from above)**

Name or Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Property Information**

Name or Business Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Zoning District (R,C,I): \_\_\_\_\_

4. Parking Spaces (off street): Present: \_\_\_\_\_ Proposed: \_\_\_\_\_

Height of Proposed Building: \_\_\_\_\_

5. Present use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_





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6. Describe Project (*check ALL that apply*):
- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Erect a New Structure(s)      | <input type="checkbox"/> Swimming Pool      | <input type="checkbox"/> Change of Occupancy |
| <input type="checkbox"/> Replace a Structure(s)        | <input type="checkbox"/> Home Occupation    | <input type="checkbox"/> Demolition          |
| <input type="checkbox"/> Add to a Structure(s)         | <input type="checkbox"/> Change of Land Use | <input type="checkbox"/> Fence/ Wall         |
| <input type="checkbox"/> Other (please specify): _____ |   |  |

7. Cost of Proposed Project: \$ \_\_\_\_\_  Estimated  Actual

8. Describe Proposed Project/ Use in more detail:

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9. Will the building require Sewer Disposal \_\_\_\_\_ If yes, permit no. \_\_\_\_\_

10. Will the building require Water Connection \_\_\_\_\_ If yes, permit no. \_\_\_\_\_

Any project requiring water or sewer connections, change, or hook-up will need completed developer agreements and approval under applicable Borough Ordinances.

Have the requirements of the Borough's Sewer and Water related Ordinances been met?  Yes  No

11. Is the building or use located in a floodplain area?  Yes  No

If yes, all provisions of Borough's Floodplain Ordinance must be complied with.

12. Have the requirements of the Borough Subdivision and land Development Ordinance been met?

Yes  No

13. Have the requirements of the Borough Stormwater Management Ordinance been met?

Yes  No

14. Have all applicable Local and State or Federal permits been obtained?  Yes  No

15. PA One Call contacted?  Yes  No

16. Road Encroachment Permit:

Municipal  State

Private, Permit Issued:  Yes  No  Not Applicable

17. If applicable, Stake corners of new structure location on lot. This should be completed at the time the application is submitted for approval. Failure to do this will delay the issuing of zoning permit.



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- A plot plan obtained from the mapping Section, Room 206, Adams County Courthouse
- Floor plans for the main floor
- Minimum scale of 1/8" = 1'0"

I verify that the foregoing statements are true to the best of my information and belief. I understand that false statements herein are subject to the penalties of 18 PA C.S.A. Section 4904 relating to unsworn falsifications to authorities. I also understand that it is the applicant's responsibility to obtain a building permit prior to starting construction as per Act 45. I hereby certify that I am the owner of record of the named property, or that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and I understand and assume responsibility for the establishment of official property lines for required setbacks prior to the start of construction, and agree to conform to all applicable laws of this jurisdiction. I certify that the Code Enforcement Officer or his representative shall have the authority to enter the areas in which this work is being performed, at any reasonable hour, to enforce the provisions of the Codes governing this project.

**Fee of \$40.00 which is required at time of Zoning Permit Application submittal – to be paid to Biglerville Borough. Payment must be check or money order and received prior to official review – *thank you***

Fee: \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check #: \_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Approval Signature

\_\_\_\_\_  
Date



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**TO BE FILLED IN BY ZONING OFFIER/ ADMINISTRATOR:**

The following shall be the minimum requirements for the proposed project(s) as set forth in the Borough Zoning Ordinance.

1. Plot Plan Submitted?     Yes     No     Not Required
2. Zoning District of Property: \_\_\_\_\_  
     Required Building Setback:    Front: \_\_\_\_\_    Rear: \_\_\_\_\_    Side: \_\_\_\_\_  
     Proposed Structure Setback    Front: \_\_\_\_\_    Rear: \_\_\_\_\_    Side: \_\_\_\_\_  
     Second Structure Setback:    Front: \_\_\_\_\_    Rear: \_\_\_\_\_    Side: \_\_\_\_\_

Does proposed project conform with building Setback requirements?     Yes     No     Not Applicable

Remarks: \_\_\_\_\_  
 \_\_\_\_\_

3. Minimum Loading Space: \_\_\_\_\_    Loading Space Provided: \_\_\_\_\_
4. Maximum Lot Coverage: \_\_\_\_\_    Proposed Lot Coverage: \_\_\_\_\_

Remarks: \_\_\_\_\_  
 \_\_\_\_\_

**CERTIFICATION**

1. The Proposal     DOES     DOES NOT comply with the Borough Zoning Ordinance.
2. The proposal     DOES     DOES NOT require any new water and/or sewer connection, tapping fees or connection fees and complies with local regulation for water and/or sewer.
3. A Uniform Construction Code Building Permit is required?     YES     NO  
     Remark: \_\_\_\_\_
4. Is a variance required?     YES     NO
5. Is a Special Exception required?     YES     NO
6. A permit for the above described project/use was     GRANTED     DENIED     EXEMPT  
     On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_
7. This permit expires on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_
8. If applicable, the following conditions were placed on a special exception permit by the Zoning Hearing Board:  
     \_\_\_\_\_  
     \_\_\_\_\_  
     \_\_\_\_\_

9. Signature of Zoning Officer: \_\_\_\_\_    Date: \_\_\_\_\_



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***Municipal Official Use ONLY***

Checklist of preliminary requirements for obtaining a building permit, approvals to be obtained prior to applying for a building permit. All items must be addressed. Mark N/A for those that are not applicable. Attach extra sheets if necessary to identify special requirements or conditions.

- |  |                             |
|--|-----------------------------|
| <input type="checkbox"/> Sub-Division & Land Development, Municipal resolution # _____                               | Date of Approval _____      |
| <input type="checkbox"/> Sewage permit from Sewage Enforcement Officer, Permit # _____                               | Date of Approval _____      |
| <input type="checkbox"/> Stormwater Management, Approved by: _____   | Date of Approval _____      |
| <input type="checkbox"/> Conservation District notification per chapter 102  | Date of Approval _____      |
| <input type="checkbox"/> NPDES Permit # _____ for earth disturbances 1 acre or more                                  | Date of Approval _____      |
| <input type="checkbox"/> Sidewalk Permit, PennDOT # _____ or Borough Permit # _____                                  | Date of Approval _____      |
| <input type="checkbox"/> Public water tap, Permit # _____  | Date of Approval _____      |
| <input type="checkbox"/> Public sewer tap, Permit # _____  | Date of Approval _____      |
| <input type="checkbox"/> Historical Architectural Review Board <input type="checkbox"/> Check for Special Conditions | Date of Approval _____      |
| <input type="checkbox"/> Other, road alteration, etc. <input type="checkbox"/> Check for Special Conditions          | Date of Approval _____      |
| <input type="checkbox"/> Floodplain Mapping – Project may contain flood plain.                                       | Date of Review _____        |
| <input type="checkbox"/> Municipal Setback Requirements <input type="checkbox"/> Check for Special Conditions        | Date of Approval _____      |
| <input type="checkbox"/> Extra pages attached to describe special conditions or circumstances                        | How many extra pages? _____ |