



# BENSALEM TOWNSHIP

Building and Planning Department  
 2400 Byberry Road • Bensalem, PA 19020  
 Office 215-633-3644 • Fax 215-633-3753

## ZONING PERMIT APPLICATION

Permit No:	
Date:	

<b>Zoning and Project Data</b>	Applicant's Name: _____ Phone No: _____						
	Address: _____						
	Email Address: _____	Tax Parcel No: _____					
	Owner's Name: _____						
	What is Being Built? _____						
	Existing Use: _____						
	Proposed Use: _____						
	Zoning Classification: _____						
	SHOW MINIMUM SETBACKS REQUIRED BY MUNICIPAL ZONING ORDINANCE (In Feet)						
	Front	Ft	Rear	Ft	Right Side	Ft	Left Side

Sq. Ft. of Conditioned Space	_____	Floor Area of <b>Addition</b> (sq. ft.)	_____
Sq. Ft. of Unconditioned Space	_____	Floor Area <b>Renovated</b> (sq. ft.)	_____
Number of Stories Above Grade	_____	# of Multi-Family Dwelling Units	_____
Does it have a Basement	_____	# of Accessible Dwelling Units	_____
Floor Area of <b>New</b> Construction (sq. ft.)	_____		
Description of Work to be Completed:	_____		

<b>Building Characteristics</b>	Square Footage of Lot	_____	Lot Depth	_____
	Square Footage of Existing Building	_____	Side Yard No. 1	_____
	Square Footage of Proposed Building	_____	Side Yard No. 2	_____
	Lot Front Width	_____	Total Side Yards	_____
	Height	_____	Front Yard	_____
	Impervious Surface Cover	_____	Rear Yard Setback	_____
	No. of Stories	_____	Total Building Area - All Floors	_____ Sq. Ft.
	Height of Structure	_____ Ft.	Volume of Structure	_____ Cu. Ft.
	Area - Largest Floor	_____ Sq. Ft.	Total Land Area Distributed	_____ Sq. Ft.
	<b>Estimated Cost of Building Work: \$</b> _____			

**I/We** do declare under the penalties of perjury, that this application has been examined by me/us; and to the best of my/our knowledge and belief it is true, correct and complete.

**I/We** hereby certify and agree that, if a permit is issued, all of the provisions of the building, housing, zoning, and fire codes of the Township of Bensalem will be complied with, whether herein specified or not; and **I/We** hereby agree to save, indemnify and keep harmless the Township of Bensalem against all liabilities judgments, costs and expenses which may in any way accrue against said Township of Bensalem in consequence of the granting of the permit or from the use or occupancy of any building, sidewalk, street or sub-sidewalk placed by virtue thereof and will in all things strictly comply with the conditions of the permit.

Signature \_\_\_\_\_ Date \_\_\_\_\_  Owner  Applicant  Agent

**A SIGNED COPY OF THIS APPLICATION IS REQUIRED PRIOR TO ISSUANCE OF PERMIT**

<b>ZONING OFFICER DECISION</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Zoning Officer Signature _____ Date _____	<b>ZONING HEARING BOARD DECISION</b> <input type="checkbox"/> Approved <input type="checkbox"/> Denied Appeal No. _____ Decision Date: _____
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**Note:** Any stipulations or conditions imposed by the Zoning Hearing Board are incorporated in this permit.