

## For New Sign(s) or Replacement of Existing Sign

### Zoning Permit Application Instructions and Zoning Permit Application

#### Page 1

Work Site Address: Property address for the site where the use will take place. If no address exists, obtain one from the Elk County GIS Coordinator, Jim Abbey at (814) 776-5378.

Property Owner: Name of person who holds title to property where the sign will be erected.

Mailing Address: Mailing address of the property owner.

City, ST, Zip: City, State and Zip code for the mailing address of the property owner.

Telephone: Telephone number of the property owner.

Email: Electronic mail address of the property owner, if they wish to receive correspondence from the City via electronic mail.

Architect/Engineer: Name of the producer of the construction drawings if by someone other than the agent or owner. Or the contractor performing the work (if applicable).

Address: Address of the producer of the construction drawings if by someone other than the agent or owner. Or the contractor performing the work (if applicable).

City, ST, Zip: City, State and Zip code of the mailing address of the producer of the construction drawings if by someone other than the agent or owner. Or the contractor performing the work (if applicable).

Telephone Number: Telephone number of the producer of the construction drawings if by someone other than the agent or owner. Or the contractor performing the work (if applicable).

Email: Electronic mail address of the architect/engineer, if they wish to receive correspondence from the City via electronic mail (if applicable).

Agent: Name of the applicant if they are not the owner of the property where the sign is being erected (if applicable).

Agent Address: Address of the applicant if they are not the owner of the property where the sign is being erected (if applicable).

City, ST, Zip: City, State and Zip code for the mailing address of the agent (if applicable).

Agent Telephone: Telephone number of the applicant if they are not the owner of the property where the sign is being erected (if applicable).

## For New Sign(s) or Replacement of Existing Sign

Agent Fax: Fax number of the applicant if they are not the owner of the property where the sign is being erected (if applicable).

Agent Email: Electronic mail address of the agent, if they wish to receive correspondence from the City via electronic mail (if applicable).

Signature of Owner / Authorized Agent: The application **MUST** be signed by the property owner or his/her authorized agent. If the certification is not signed; the permit will be denied.

Date: The date that the property owner or authorized agent signed the certification.

### Page 2 BUILDING SECTION

RESIDENTIAL  COMMERCIAL  INDUSTRIAL: Please check the box of the type of use the sign is being erected for.

Description of Work: Describe the sign characteristics that will be erected on the property. Include length and width of the sign being erected, the area of the sign being erected, and list the square footage of any other existing sign on the property which is to remain on the property after the new installation.

Type of Construction: Describe the prevalent material of the building for the proposed sign.

Type of Foundation: If a foundation is proposed, list the prevalent material of the foundation for the sign.

Size of Improvement: List the length x width or square footage of the proposed sign.

Residential Use: Describe the residential use if applicable.

Commercial Use: Describe the commercial use if applicable.

Industrial Use: Describe the industrial use if applicable.

### ZONING SECTION

Lot Width: The length of the property line that is most-parallel with the street described in the property address.

Lot Depth: The length of the property line that is closest to a right-angle with the street described in the property address, usually described as the side property line. If a parcel is abnormally shaped, the distance between the front property line and the rear property line can be used.

## For New Sign(s) or Replacement of Existing Sign

Front Setback: The distance between the proposed sign and the street of address right-of-way line or property line, whichever is less.

Rear Setback: The distance between the proposed sign and the rear property line. For corner lots the rear property line is directly opposite the street of address. For through lots, the rear property line is the line directly opposite the street of address property line.

Side Setback: The distance between the proposed sign and the side property line. For corner lots the side yard is the yard directly opposite the non-address street.

Number of Stories: Not applicable.

Total Height: The total height of the proposed sign above the immediately adjacent finished grade.

Signature: The application **MUST** be signed by the property owner or authorized agent. If the application is not signed; the permit will be denied.

### **Page 3 APPROVAL PAGE**

For official use only, nothing required to be filled in.

### **Page 4 SMALL PROJECT STORMWATER MANAGEMENT APPLICATION**

Usually not applicable unless additional impervious area has to be created for the new signage. The Elk County Stormwater Management Plan of 2010 required the City of St. Marys to revise its Stormwater Management Ordinance to manage the stormwater of all impervious improvements. The lengths and widths of all impervious surfaces, both existing and proposed must be listed in Table F-1. The application **MUST** be signed by the property owner or authorized agent. If the application is not signed; the permit will be denied.

### **Page 5 LOT DIAGRAM (Maybe be replaced with equivalent diagram)**

Draw a sketch of all existing and new improvements located on the lot. If the lot is a regular lot; use the top of the page, if it is a corner lot; use the bottom of the page. Draw or sketch any and all buildings, structures, asphalt paved driveways, concrete driveways or patios, existing signs or any other combination of materials that is placed over the ground and covers it within the property boundaries and prevents the infiltration of water into the ground. Also, include the length and width or any other outside dimensions of all buildings, structures, asphalt paved driveways, or concrete driveways or patios; or the square footage of area that they occupy. Include the location of the proposed sign as situated on the property.



# ZONING PERMIT APPLICATION

## CODE ENFORCEMENT DEPARTMENT

11 Lafayette Street  
Saint Marys, PA 15857

Phone (814) 781-1718 x227  
Fax (814) 834-1304

www.stmaryspa.gov

[City of St. Marys Use Only]

Application Number: \_\_\_\_\_

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

Zoning District: \_\_\_\_\_

PERMIT FEE: \$30.00

Tax Parcel ID#: \_\_\_\_\_

[ ] CASH [ ] CHECK # \_\_\_\_\_

Subdivision: \_\_\_\_\_ Lot#: \_\_\_\_\_

RECEIPT # \_\_\_\_\_

Complete all applicable information. Be specific and descriptive. Do not omit important entries such as telephone numbers, Fed ID Numbers etc. INCLUDING SIGNATURES.

[ Please Print ]

( If applicable )

Work Site Address: \_\_\_\_\_

Agent: \_\_\_\_\_

Property Owner: \_\_\_\_\_

Agent Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, ST, Zip: \_\_\_\_\_

City, ST, Zip: \_\_\_\_\_

Agent Telephone: \_\_\_\_\_

Telephone: \_\_\_\_\_

Agent Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Agent Email: \_\_\_\_\_

Architect / Engineer: \_\_\_\_\_

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

City, ST, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

### CERTIFICATION:

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/her authorized agent, and I agree to conform to all applicable laws of this jurisdiction. In addition, if a permit for work described in this application is issued, I certify that the Code Official or his authorized representative(s) shall have the authority to enter areas covered by such permit at any reasonable time to enforce the provisions of the code(s) applicable to such permit.

X  
\_\_\_\_\_  
Signature of Owner / Authorized Agent

\_\_\_\_\_  
Date

**BUILDING SECTION**

**RESIDENTIAL**

**COMMERCIAL**

**INDUSTRIAL**

Description of Work:

Type of Construction: \_\_\_\_\_

Residential Use: \_\_\_\_\_

Type of Foundation: \_\_\_\_\_

Commercial Use: \_\_\_\_\_

Size of Improvement: \_\_\_\_\_

Industrial Use: \_\_\_\_\_

**ZONING SECTION**

Lot Width: \_\_\_\_\_ feet

Lot Depth: \_\_\_\_\_ feet

Front Setback: \_\_\_\_\_ feet

Rear Setback: \_\_\_\_\_ feet

Side Setback: \_\_\_\_\_ feet

Side Setback: \_\_\_\_\_ feet

Number of Stories: \_\_\_\_\_

Total Height: \_\_\_\_\_ feet

I hereby certify that the information contained in this permit application is accurate to the best of my knowledge and any incorrect, inaccurate, or omitted information, whether intentional or not, may result in the revocation of all or part of the permit approval, and is considered a violation of the City of St. Marys Zoning Ordinance of 2005 and may result in paying a judgment of \$500, plus all court costs and reasonable attorneys fees incurred by the City as a result thereof. I also hereby certify that I am the owner of record or the agent of the owner of record, and am authorized to make this application.

X \_\_\_\_\_  
(Signature Owner / Authorized Agent)

**RECOMMENDATION OF ZONING OFFICER**

Zoning Application: [ ] Approved [ ] Denied (cite specific section of Zoning Ordinance):

Appealed and referred to the Zoning Hearing Board for:

[ ] Variance [ ] Special Exception [ ] Interpretation

Fee: \_\_\_\_\_ [ ] Cash [ ] Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

Fee Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_

**ACTION TAKEN BY ZONING HEARING BOARD**

[ ] Variance Granted [ ] Special Exception Granted [ ] Application Denied [ ] Application Misinterpreted

According to Section(s)

of the City of St. Marys Zoning Ordinance of 2005.

Zoning Hearing Board Chairperson: \_\_\_\_\_ Date: \_\_\_\_\_

**ACTION TAKEN BY CITY COUNCIL**

Conditional Use Zoning Application: [ ] Approved [ ] Denied

City Council: \_\_\_\_\_ Date: \_\_\_\_\_  
Mayor

Attest: \_\_\_\_\_ Date: \_\_\_\_\_  
Secretary

REGULAR LOT

REAR

SIDE

SIDE

FRONT

RIGHT OF WAY

STREET OF ADDRESS

FRONT

NON -ADDRESS STREET

RIGHT OF WAY

FRONT

SIDE

REAR

CORNER LOT