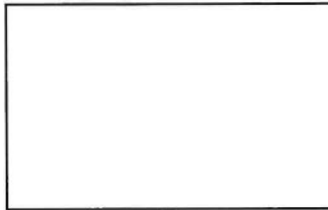


WEST PENN TOWNSHIP

27 Municipal Road, New Ringgold, PA 17960
Office: 570-386-4507
Fax: 570-386-5851
(Hours: Mon, Tues, Wed 9-3pm, Thurs 9-Noon)

**DRIVEWAY PERMIT
APPLICATION
INITIAL CONSTRUCTION**

1
**DATE APPLICATION
RECEIVED BY
WEST PENN TOWNSHIP**



INSTRUCTIONS:

- A. Fill in all portions (Please Print) of Application, as an incomplete Application will be rejected.
- B. Applicant to include at least the following with this Application:
 - 1) Exact footage setback from the adjoining property (minimum 10ft) and any street intersection (minimum 30ft)
 - 2) Speed limit on road and line-of-sight foot distance from driveway in both directions
 - 3) How surface drainage will be diverted from roadway. (pipe diameter not less than 15 inches)
 - 4) The length (no limit) & width (residential width: minimum 12ft maximum 15ft, non-residential width: minimum 20ft maximum 30ft) of proposed driveway, and rounded entrance to road residential: minimum radius 5ft, maximum 20ft, non-residential: minimum radius 20ft, maximum 50ft)
 - 5) The type and depth of fill used to construct/pave driveway (suitable sub-grade compacted depth to be no less than 4 inches)
 - 6) If driveway joins a Commonwealth road: a copy of the Highway Occupancy Permit (HOP)
 - 7) Grade of drive (no more than 8% in Township Right of Way – 14% for remainder of driveway)
 - 8) Degree driveway intersects road (90% preferred, not less than 60% & no more than 120%)
 - 9) If property is within a subdivision: the Subdivision Name, copy of approved plan, Lot Number, and Lot length & Width
 - 10) Information necessary to assure Zoning Officer that proposed driveway conforms to applicable Zoning Ordinance and the Township's Driveway Ordinance regulations.
- C. Upon written notification, the person, firm, or corporation performing the work on the proposed driveway **MUST PICK UP** the Driveway Permit & Driveway Ordinance at the Township Building.
- D. Any questions are to be directed to the Zoning Officer of the Township.

Pursuant to PA Act 38 (amending Acts 287 & 171), notification to the "one Call System" is required at least three working days prior to disturbing earth with any type of powered equipment.
Call toll-free 1.800.242.1776.
It is the responsibility of the applicant to make this notification.

APPLICANT NAME: _____

Are you the record owner and/or equitable owner of property? Yes No

If No: Owner's Name: _____ Owner's Signature: _____

Mailing Address (Number and Street): _____
(Town, State, Zip Code): _____

Phone Number: Home (____) _____ Cell (____) _____

Email Address: _____

Address/Location of proposed Driveway: _____
(Number and Street) _____
(Town, State, Zip Code) _____

Deed Book Volume # _____ Page # _____ (found on Deed)
Tax Identification (U.P.I) # _____ - _____ - _____ (_____) (found on School Tax bill)

Person, Firm, Corporation performing the construction: _____
Phone: _____ - _____ - _____ Cell: _____ - _____ - _____
Address (Number and Street) _____
(Town, State, Zip Code) _____

SKETCH PLAN

Sketch in proposed driveway & include all information

REAR PROPERTY LINE

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FRONT PROPERTY LINE _____ ROAD NAME

Applicant may use additional page(s) if needed.

1. Exact footage setback from adjoining property _____ ft & street intersection _____ ft
2. Speed Limit _____ mph & line-of-sight from driveway _____ ft (left) _____ ft (right)
3. Surface drainage diverted by _____
4. Proposed driveway: Length _____ ft, width _____ ft rounded entrance _____ ft
5. Fill type & depth used to construct/pave driveway _____
6. Is driveway joining a Commonwealth road? YES* NO
 *If YES, attach copy of Highway Occupancy Permit or Township Driveway Permit will not be issued.
7. Grade of driveway within Township Right-of-Way _____%
 Grade of Driveway beyond Township Right-of-Way _____%
8. Degree at which driveway intersects road _____%
9. If proposed driveway is within a Subdivision: MUST Attach approved plan,
 Subdivision Name _____, Lot # _____ Lot Length _____ ft Width _____ ft
10. Any additional information _____

NOTE: Please clearly delineate (stakes, flags, etc) the location of proposed Driveway on property. Before a Driveway Permit is issued an on-site inspection of Driveway site will be conducted to determine conformity to Township Zoning & Driveway Ordinance regulations.

IS PROPOSED DRIVEWAY LOCATED WITHIN A FLOODPLAIN OR FLOODWAY?
 ___ NO ___ YES * * If YES, provide the following:

- 1) F.E.M.A Map Panel Number: _____
- 2) If the Floodplain/Floodway limits not established per FEMA, indicate whether limits have been established via: a) ___ PA DEP's '50 ft from top of stream bank rule.' or b) ___ Engineer Study (HEC-RAS Analysis)
- 3) Information to assure Zoning Officer that proposed driveway conforms to Township, County, Commonwealth, and Federal Floodplain ordinances, and any other regulations regarding Floodplain/Floodway issues.
- 4) Engineer/Architect's Certification: I hereby certify that proposed driveway is adequately designed to protect against flood damage and that driveway plans for site are in compliance with any and all rules and regulations concerning driveways within identified flood-prone area.

SEAL:

Date: ___/___/___

Signature: _____

Address: _____

If the subject property was ever granted any type of variance, special exception, and/or any other form of relief from the regulations contained in the Zoning Ordinance by the Zoning Hearing Board AND/OR if the subject property was ever subject to any restrictions by deed, recorded plan, action of the Zoning Hearing Board and/or any other means, the applicant must divulge said information with this application. Please be specific as to the date of any Zoning Hearings etc. The applicant MUST attach a photocopy of any deed, recorded plan, agreement, will, covenant, and/or Zoning Hearing Board decision which contains said restrictions, variances, and/or special exceptions which affect the subject property.

If, to the best of the applicant's knowledge and belief, there are no such variances, special exceptions, and/or other restrictions, which would affect the use of the subject property for the activity for which a Driveway Permit is being applied for, please indicate your opinion by signing

VERIFICATION

I _____ (PLEASE PRINT), hereby verify that the information contained in this application, including all statements, representations, and other entries, is true and correct to the best of my knowledge, information, and belief. This verification is made subject to the penalties of 18 PA, C, S, 4904, relating to un-sworn falsification to authorities, and 4911, relating to tampering with official records.

Date: ___/___/___ _____
 (Applicant's Signature)

NOTE:

- 1) Applicant must notify the Township in writing, seven (7) days prior to completion of proposed Driveway so Final Inspection may occur.
- 2) Applicant/Property Owner is responsible to keep vegetation trimmed in order to maintain minimum Line-of-Sight distance. Objects may not be placed within the Line of Sight.
- 3) Surface drainage may not be directed onto any Township or Commonwealth Right-of-Way.

DRIVEWAY FEE: \$_____ (approved or denied)
 Fee to accompany completed Permit Application
 Check or Money Order payable to **West Penn Township**

Submit completed application (which includes a maximum of one half hour of engineer fees. Any and all additional fees are the responsibility of the applicant) to:

WEST PENN TOWNSHIP, 27 MUNICIPAL ROAD, NEW RINGGOLD, PA 17960

OFFICE USE ONLY

Date of Preliminary Inspection: ___/___/___

Driveway Permit: ___ DENIED ___ APPROVED # _____ - _____ . d

Reason Driveway Permit DENIED: _____

Zoning Officer Signature: _____