717/642-5640 FAX 717/642-5649
borofairfieldpa@comcast.net

BOROUGH OF FAIRFIELD
108 West Main St., POB 263
Fairfield, PA 17320

PERMIT #________________

Plot Plan must accompany application.

APPLICATION FOR LAND USE (ZONING) PERMIT- New Construction & Additions

Section A

Applicant Name ________________________________ Phone # ______________________

Property Owner (if different) ________________________ Email or Alt Phone # _____________________

Mailing Address ________________________________ __________________________________

Project location (if different from mailing)_______________________________ **Zoning district**_________________

Adams County Parcel # 1 1 0 0 __ - __ __ __ __ - - - 0 0 0

Project description (for fences skip section B & use Addendum)____

Section B

The **lot** is ___ feet wide by ____feet long. The **front yard** is ____feet deep. The **rear yard** is ____feet deep.

Proposed construction is: _____ feet wide - _____ feet deep - _____ feet high

Construction information:

Foundation materials: _________________________ Exterior wall materials: ____________________

Interior wall materials: ________________________ Roofing materials: ________________________

Type of heating system: _______________________ Central AC (yes or no) _________

Number of rooms: __________# of baths: __________# of fireplaces: ________________

Water source (municipal or well) ____

Permits: Water permit # __________Sewer permit #: ____________ Driveway permit #: _____________

Estimated **cost** of construction (including interior finishes): ____________________________________

Estimated **start** date: ________________ Estimated **completion** date: _________________

Other details (as necessary) If improvement is a mobile home, indicate size, serial #, make and year.

____

Section C **PLEASE READ THE FOLLOWING AND ACKNOWLEDGE BY SIGNING BELOW**

The applicant certifies that the information contained herein is TRUE & CORRECT. Applicant hereby agrees to notify the Fairfield Borough zoning officer as soon as a construction foundation or any addition to an existing building is laid out or staked out PRIOR TO any building excavation or construction work begins AND acknowledges that the builder must contact the Borough's appointed inspection agency for state-required permits. AUTHORIZATION IS HEREBY GIVEN for the Borough's appointed Agency or Code or Zoning Officer to enter the property for the purpose of any inspection. An Adams County Improvement Permit is required for any project estimated to cost $2,500.00 or more.

Date of application: ____________ Applicant(s) **signature** _____________________________________

>>>

The following section is for use by the Zoning Officer only:

Check here ________ when Conservation District Checklist has been signed and is on file.

Fees___________________ $________________ Permit effective date ____________________

___________________ $________________ Permit expiration date ___________________

___________________ $________________

___________________ $________________ Date sent to county _____________________

TOTAL $________________ Fees Received by _______________________

Permit **approved**: Date ______________

Permit **denied**: Date ________________ Reason(s) for denial _________________________________

Zoning officer signature _______________________________________

Date(s) of inspection(s) 1st __________ 2nd __________ Date of final approval ______________________

See reverse for Repair/Renovation application

717/642-5640 FAX 717/642-5649
borofairfieldpa@comcast.net

PERMIT #________________

BOROUGH OF FAIRFIELD
108 West Main St., POB 263
Fairfield, PA 17320

Plot Plan must accompany application, where applicable.

APPLICATION FOR LAND USE (ZONING PERMIT)- Repairs & Renovations

Applicant Name ________________________________ Phone # ______________________

Property Owner (if different) ________________________ Email or Alt Phone # ______________________

Mailing Address ________________________________ ________________________________

Project location (if different from mailing)________________________________ **Zoning district**__________________

Adams County Parcel # 1 1 0 0 __ -__ __ __ __ - - - 0 0 0

Description of repair/renovation ____
____
____
____

Repair/Renovation WILL or WILL NOT alter an existing structure ________________________________

*Note: If the property is located within the **Fairfield Historic District**, repairs and renovations which alter the pre-renovation/repair appearance of the structure **must be approved by the Historic Area Review Board** and subsequently receive a Certificate of Appropriateness from the Borough Council.*

Estimated **cost** of repair/renovation: ________________

Estimated **start** date: _________________ Estimated **completion** date: _____________

Other details (as necessary): ____

PLEASE READ THE FOLLOWING AND ACKNOWLEDGE BY SIGNING BELOW

The applicant CERTIFIES that the information contained herein is TRUE & CORRECT. Applicant ACKNOWLEDGES that the builder must contact the Borough's appointed inspection agency for state-required permits. AUTHORIZATION IS HEREBY GIVEN for the Borough's appointed Agency or Code and Zoning Officer to enter the property for the purpose of any inspection.

Date of application: ____________ Applicant(s) **signature** ____________________________________

>>

The following section is for use by the Zoning Officer only:

Building Permit IS / IS NOT required

Check here ________ when Conservation District Checklist has been signed and is on file.

Fees____________________ $________________
____________________ $________________
____________________ $________________
____________________ $________________
TOTAL $________________

Permit effective date ____________________
Permit expiration date ___________________

Date sent to county _____________________
Fees Received by _______________________

Permit **approved**: Date ______________ **Zoning officer signature** ______________________________

Permit **denied**: Date ________________ Reason(s) for denial ___________________________________

Date(s) of inspection(s) 1st __________ 2nd __________ Date of final approval ______________________

See reverse for New Construction application