

Date Application Received: _____

Permit #: _____

Application Taken By: _____

Fee (Check/Cash): _____

**Land Use Permit Application
Borough of Mercersburg
Franklin County, Pennsylvania 17236
Phone: 717-328-3116**

Fee Calculation:
\$25 for first \$1,000 of project
\$1 for each additional \$1,000 of project

The undersigned hereby applies for a Land Use Permit as per Ordinance 6-2, to build, erect, remodel or demolish a structure in Mercersburg Borough. The proposed construction/demolition of a building(s) must include a schematic plot plan showing Boundary Lines and location of existing or proposed building(s). Application for a Construction Permit will not be accepted until a Land Use Permit is issued by Mercersburg Borough. It will be the applicant's responsibility to contact **Pennsylvania Municipal Code Alliance (PMCA), 380 Wayne Avenue, Chambersburg, PA. 17201, phone: (717) 496-4996, fax: (717) 446-0586, to obtain a Construction Permit.**

Upon completion of the project in accord with all applicable codes and application by the undersigned, PMCA will issue a Land Use Occupancy Permit. The structure may not be occupied or used in any way until issuance of a Land Use Occupancy Permit. No Land Use Occupancy Permit shall be granted without a Construction Occupancy Permit. If construction is to extend past one year from the date of this application then a renewal is required under section 8 of Ordinance 6-1 of the Mercersburg Borough Code.

Part 1 – TO BE COMPLETED BY OWNER OR APPLICANT (please print)

Property Information <i>(Where the work be performed)</i>	
Street Address:	
City, State, Zip Code:	

Property Owner	
Owner Name:	
Owner Address:	
Owner Phone:	
Owner E-mail:	

Applicant <i>(If different from owner)</i>	
Applicant Name:	
Applicant Address:	
Applicant Phone:	
Applicant E-mail:	

Contractor/Person(s) Performing the Work	
Contractor:	
Company Name:	
Contractor Phone:	
Contractor E-mail:	

Zoning District: _____

Historic District: Yes No

Property Address: _____

Part 1 – TO BE COMPLETED BY OWNER OR APPLICANT (Continued) (please print)

Type of Project

New Construction: Alteration: Other: _____

Proposed Use: _____

Provide a Brief Description of Project: _____

Lot Size: _____ Building Dimensions: _____ Height: _____

Parking Spaces: _____ Estimated Project Cost: _____ Estimated Date of Completion: _____

Variance or Special Use Requested: _____

Applicant's Signature: _____ Date: _____

Provide a simple sketch of the project with property lines and dimensions (or add a separate sheet)

Property Address: _____

Part 2- TO BE COMPLETED BY BOROUGH PERMIT OFFICIAL

Check List

HARB Review:	Date: _____	Approved: _____	Not Required: _____
Zoning Hearing Board:	Date: _____	Approved: _____	Not Required: _____
Water Authority Approval:	Date: _____	Approved: _____	Not Required: _____
Sewer Authority Approval:	Date: _____	Approved: _____	Not Required: _____
Review by Borough Engineer:	Date: _____	Approved: _____	Not Required: _____
Franklin County Planning:	Date: _____	Approved: _____	Not Required: _____

Permit Granted: YES NO Date Issued: _____

Reason for Denial:

Zoning Official's Signature: _____ Date: _____

Copy to Code Official: Date Sent: _____

Copy to County Tax Assessment: Date Sent: _____

2 Copies Provided to Applicant: Date Sent: _____
By - Initials _____

CONTACT INFORMATION

**Pennsylvania Municipal Code Alliance
1013 Wayne Avenue
Chambersburg, PA. 17201**

Phone: (717) 496-4996

Fax: (717) 446-0586

pmca@pacodealliance.com