

ZONING PERMIT #: _____

City of Duquesne

ZONING DISTRICT #: _____



12 S. Second Street. Duquesne, PA 15110. Phone: (412)-469-0544

APPLICATION FOR ZONING PERMIT

DATE APPLICATION WAS RECEIVED:

PARCEL NUMBER:

LOCATION OF PROPERTY:

ZONING DISTRICT:

OWNER'S NAME:

ADDRESS FOR PERMIT:

CITY

STATE

ZIP

PHONE NUMBER OF APPLICANT:

PROPOSED USE OF BUILDING/STRUCTURE:

DESCRIPTION OF CONSTRUCTION:

SETBACKS: *MUST BE FILLED IN.*

SQ. FT. *MUST BE FILLED IN.*

FROM RIGHT PROPERTY LINE:

FT.

FROM LEFT PROPERTY LINE:

FT.

FROM FRONT PROPERTY LINE:

FT.

FROM BACK PROPERTY LINE:

FT.

HEIGHT OF PURPOSED STRUCTURE:

\$50.00 if no inspection required

\$100.00 if inspection is required

A drawing of property layout for construction needs to be accompanied with the Zoning Application

ZONING - FOR MUNICIPAL USE ONLY

APPROVED

DENIED

BUILDING PERMIT NEEDED

MANAGER:

DATE:

ZONING OFFICER:

DATE:

REASON FOR DENIAL:

This permit is issued in accordance with the City of Duquesne Zoning Ordinance. The Permit holder shall abide by the regulations established by the City Zoning Ordinance.