



SKIPPACK TOWNSHIP

www.skippacktownship.org
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Board Of Supervisors
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ZONING PERMIT

Application No.: _____ Date: _____

Applicant: _____
Signature Print Name

I do hereby make application to use the following property:

Owner: _____
Signature Print Name

Property Address: _____ Phone: _____
Block #: _____ Unit #: _____

Fee: \$50 (sheds less than 200 SF); \$100 (sheds more than 200 SF)

Received: _____ Check #: _____ Cash: _____

For the following use(s): _____

Size of Shed: _____ 4' from property line for sheds under 199sf _____
10' from property line for sheds 200sf & over _____

(Please submit drawing, showing location of shed on property. Must be 10' behind principle building in rear yard)

To be completed by Zoning Officer:

Property Zoning: _____ Permitted Use: _____ Yes _____ No

Code Enforcement/Zoning Officer _____ Date _____

Zoning Officer's Comments: _____

