

CITY OF SAINT MARYS

ELK COUNTY, PENNSYLVANIA

(814) 781-1718
 (814) 834-1304 (FAX)
 www.citvofstmarvs.com

Application # _____
Date Received _____
Zoning District _____
Fee \$20.00 _____

APPLICATION FOR A USE CERTIFICATE

Name of Business _____

Owner _____

Mailing Address _____

Telephone Number _____

1. New Use (Upon completion of building construction)
2. Change of Use (Existing Building)
3. Home Occupation (Residence)
4. Non-Conforming Use _____
5. Description of Use _____

DESCRIPTION OF PROPOSED USE

1. Land only will be used for _____
2. Building will be used for _____
3. Number of employees _____

DESCRIPTION OF PRESENT USE OF BUILDING AND/OR LAND

1. Present use _____ since _____

DESCRIPTION OF LAND

1. _____ Road/Street
 Deed from _____ dated _____ book & page _____
2. Frontage _____ Depth _____
3. Front yard depth _____ Rear yard depth _____
4. Private driveway size _____
5. Number of parking spaces _____
6. Sewage disposal _____ Water supply _____

DESCRIPTION OF BUILDING

1. Type of construction _____
2. Overall size _____ Size of area to be used _____
3. Date of construction _____

Signature of Applicant(s) _____

RECOMMENDATION OF ZONING OFFICER

Approved Denied Section _____ Zoning Ordinance #33
 Zoning Hearing Appeal: Variance Special Exception Interpretation
 Fee _____ paid _____ (date)
 Date _____ Zoning Officer _____

ACTION BY ZONING HEARING BOARD

Variance granted Special Exception granted
 Application denied Application misinterpreted
 Date _____
 Chairman _____

ACTION BY CITY COUNCIL

Approved Denied
 Date _____
 Council _____

CITY OF SAINT MARYS
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APPLICATION FOR HOME OCCUPATION

Name _____
Address _____
Home Occupation _____
Square foot area of home _____ Square foot area of auxiliary buildings _____
Total square foot of area to be utilized _____ Parking spaces available _____
Hours of operation _____ Days of operation _____
Miscellaneous (noise levels, smoke, odors, etc.) _____

List of equipment _____

Size of sign _____

Applicant signature _____ Date _____

NOTICE: By signing this application, the applicant allows the City Zoning Officer the right to periodically inspect the premises for adherence to the decision of the hearing board or any formal complaints issued to the City of St. Marys concerning the above use.

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ZONING OFFICER

Zoning District _____ Date of visual inspection _____

Comments _____
