



## SUMMIT TOWNSHIP

1230 Townhall Road West Suite 100

Erie, PA 16509

814-868-9686

[www.summittownship.com](http://www.summittownship.com)

Tamara Cass – Zoning Administrator Email: [tcass@summitpa.us](mailto:tcass@summitpa.us)

# ZONING PERMIT APPLICATION

Residential	Non-Residential	Industrial
Single-Family Dwelling \$400 Additions/Accessory Structure \$50 Permit Renewal \$50 Late Permit Application \$100 or Double	New Building 1-1,500 sq. ft. \$750 1,501-10,000 sq. ft. \$1,400 Over 10,000 sq. ft. \$2,500 Additions/ Renovations 1-500 sq. ft. \$300 501-2,500 sq. ft. \$600 Over 2,500 sq. ft. \$1,200	New Building 1-1,000 sq. ft. \$350 1,001-5,000 sq. ft. \$750 5,001-25,000 sq. ft. \$2,000 Additions/ Renovations Over 25,000 sq. ft. \$4,800 Less than 2,500 sq. ft. \$500 Over 2,500 sq. ft. \$1,500
Temporary Use/Structure (1 week) \$50 Renewal (up to 4 additional weeks) \$25	Temporary Storage Facility \$250 Renewal \$50	Wireless Communication Tower/Co-Location \$100 Other Matters \$50

**Project Address** \_\_\_\_\_

**Property Owner(s)** \_\_\_\_\_

Contact Person \_\_\_\_\_

Address  Same as Project Address \_\_\_\_\_  
Address City State Zip

Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**Business Name**  N/A \_\_\_\_\_

Business Contact Person \_\_\_\_\_

Address \_\_\_\_\_  
Address City State Zip

Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

**Contractor**  SELF-N/A \_\_\_\_\_

Contractor Contact Person \_\_\_\_\_

Address \_\_\_\_\_  
Address City State Zip

Phone (\_\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

\*Workers Compensation Insurance Certificate or Waiver must be on file before permit can be issued

**Applicant**  Property Owner  Business  Contractor

- |  |  |
|--|--|
| <input type="checkbox"/> Single-Family Dwelling  | Estimated Cost of Construction \$ _____  |
| <input type="checkbox"/> Multi Family Dwelling   |  |
| <input type="checkbox"/> Addition  | Project Dimensions: _____ ft. Width x _____ ft. Depth  |
| <input type="checkbox"/> * Deck/Porch * Height _____ in.<br><small>Ground to top no railings</small> |  |
| <input type="checkbox"/> Pole Barn   | Total Sq. Ft. of Project: _____ sq. ft.  |
| <input type="checkbox"/> Attached Garage   |  |
| <input type="checkbox"/> Detached Garage   | *Please attach a sketch or plans of your proposed project including measurements and placement of the structure on the property. |
| <input type="checkbox"/> Shed (over 100 sq. ft.)   |  |
| <input type="checkbox"/> Inground Pool   |  |
| <input type="checkbox"/> Temporary Use/Structure _____   |  |
| <input type="checkbox"/> Temporary Storage Facility  |  |
| <input type="checkbox"/> Other: _____  |  |