

Application Date: _____

Permit Number: _____

Permit Fee: _____

Notary Fee: _____

Total Fees: _____

Escrow for Engineer Review
(separate check): _____

Driveway Permit

Lower Southampton Township

1500 Desire Ave. Feasterville, Pa 19053

215-357-7300

Work to be done: Resurface () Enlargement () Other Impervious Surface ()

Name of Owner: _____ Phone Number: _____

Address of Owner: _____

Name of Contractor: _____ Phone Number: _____

Address of Contractor: _____

Tax Parcel #: _____ Email Address of Owner: _____

Name of Applicant: (if different) _____ Phone Number: _____

The above applicant hereby makes this application for a permit to resurface or enlarge driveway or other impervious surface at the above property. All work is to be done in accordance with the rules and regulations established by local ordinance and may need review by the Township Engineer.

PLANS MUST BE ATTACHED FOR DRIVEWAY ENLARGEMENT

Original Driveway Size _____ Enlarged Driveway Size _____

Affidavit

I, _____ (Applicant or Owner) being duly sworn on his oath according to law, deposes and says that he is the person making the within application; that he resides at _____ (Applicant's address & Phone number) and that he is the agent of the owner of the property where the driveway is to be resurfaced or enlarged, and that the statements therein contained are correct and true.

Sworn and subscribed to before me this _____ day of _____ 20_____.

(Notary Public)

(Signature of Applicant)

(Zoning Official)

Approved () Denied () _____

Impervious Surface Calculation

Rev 3/12/10

This form must be filled out completely in order for your _____ permit to be reviewed.

Address: _____

Zoning District _____

R-1 zoning allows a maximum of 20% impervious coverage on your property.

R-2 zoning allows a maximum of 30% impervious coverage on your property.

R-3 zoning allows a maximum of 40% impervious coverage on your property.

Lot Size: _____ sq ft

An impervious surface calculation is required with all building permits. This calculation is part of your submitted site plan.

Site Plan: Using an aerial perspective of your property, DRAW your property (to scale) make sure to include everything that exists on your property and your proposed additional coverage along with their placement and dimensions.

This includes but not limited to: house, shed, and/or auxiliary building, driveway (including stone), walkway, patio (including EP Henry style pavers), concrete pad, in ground pool decking and garage

(Anything water can not pass through)

Impervious Calculation:

Measure: each item on your site plan

Multiply: each item's length and width to acquire the square footage per item

Add: all square footage amounts _____ sq ft of total existing coverage

_____ sq ft of existing + proposed coverage

Divide: existing coverage square footage from the total square footage of your property

Divide: existing + plus proposed coverage square footage from the total square footage of your property

Existing Impervious Coverage _____%

Existing + Proposed Impervious Coverage _____%

If your impervious coverage is over the allowable limit, please consult the Lower Southampton Township's Zoning Officer, Carol Drioli, 215-357-7300 Ext 309 Thank you.

Applicant Signature and Date

SITE OR PLOT PLAN

% of GROUND COVER

