

**PIERCE COUNTY APPLICATION
FOR ZONING and/or SETBACK PERMIT
CHECK WITH YOUR TOWNSHIP OFFICIALS TO SEE IF THEY
HAVE ANY ADDITIONAL TOWNSHIP REQUIREMENTS**

Computer # _____

DATED: _____ Fee: _____

NAME: _____
Owner or Agent

LOCATION: _____ 1/4 of the _____ 1/4 of

_____ Phone #

Sec _____, Tn. ___ N, R _____ W,
Lot _____, Bl. ____, _____

BUILDER: _____

SETBACK: (Must be at least)

C.S.T.: _____

_____ 110' from centerline of A Hwy.
or 77' from R/W (State or Federal)
_____ 100' from centerline of B Hwy.
or 67' from R/W (County)
_____ 75' from centerline of C Hwy.
or 42' from R/W (All other)

Date: _____

Sanitary Permit No. _____

Date: _____

CLASSIFICATION:

WHICHEVER IS THE GREATEST DISTANCE

Zone _____

Use _____

Bedrooms _____ # Bathrooms _____

Conditional uses, neighboring zones,
or anything objectionable in area

AGREEMENTS:

Farmland Preservation _____

Managed Forest Land _____

Conservation Reserve Program _____

WORK:

New Building _____

Addition _____

Alteration _____

Moving _____

Foundation _____

Other _____

BUILDING DETAILS:

Type: _____

Size: _____ x _____ (Ht. _____ Stories)

_____ x _____ (Ht. _____ Stories)

_____ x _____ (Ht. _____ Stories)

Cost: \$ _____

A Plot Plan is required and no liquid waste will be generated from the building without sanitary facilities.

The undersigned hereby makes application for a Zoning and/or Setback permit for the work described and located as shown herein, AND will allow access to zoning authorities for inspection.

The undersigned agrees that all work shall be done in compliance with the requirements of the Pierce County Codes, and with all other applicable Federal, State and local laws and regulations.

APPLICANT'S SIGNATURE:

Action: No. _____ issued _____

_____ denied _____

Work started _____

Work completed _____

Appealed _____

Appeal heard _____

Decision _____

Zoning Administrator

Inspection Date: _____

Remarks: _____
