



# City of Bradford

## Permits Department

24 Kennedy Street

Bradford, PA 16701

814-362-3884 ext. 121 / Fax 814-368-3335

Email: [M.Verolini@bradfordpa.com](mailto:M.Verolini@bradfordpa.com)



### Zoning Permit Application

**TO THE ZONING OFFICER:** I hereby apply for a Zoning Permit pursuant to the zoning code of the City of Bradford to construct or alter a building or accessory structure as set forth. This application may be used in conjunction with any variance applications.

Regarding Address: \_\_\_\_\_ Date: \_\_\_\_\_

Owner: \_\_\_\_\_ Applicant: \_\_\_\_\_

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip)

\_\_\_\_\_  
(City, State, Zip)

Phone: \_\_\_\_\_  
Home \_\_\_\_\_ Work \_\_\_\_\_

Phone: \_\_\_\_\_  
Home \_\_\_\_\_ Work \_\_\_\_\_

Please answer the questions below as they apply to the above regarding address: If you are applying for a change of use, please complete questions #1 and 6 and continue on to page 2. New construction requires full completion of this application.

1. What is the existing principal building and it's type of occupancy: (please check one)

\_\_\_\_\_ single family dwelling \_\_\_\_\_ double family dwelling \_\_\_\_\_ multi-family dwelling, how many units?  
\_\_\_\_\_ other – Business, Please describe: \_\_\_\_\_

2. Lot size: Width) \_\_\_\_\_ Depth) \_\_\_\_\_ Area) \_\_\_\_\_ Sq. Ft.

3. Please list all EXISTING buildings located on the proposed property/address, etc. Ex: Pool, shed, free-standing garage, house w/attached garage, etc., and their dimensions:

(1) \_\_\_\_\_ (2) \_\_\_\_\_ (3) \_\_\_\_\_ (4) \_\_\_\_\_  
(principal building) (describe) (describe) (describe)

W) \_\_\_\_\_ L) \_\_\_\_\_ H) \_\_\_\_\_ W) \_\_\_\_\_ L) \_\_\_\_\_ H) \_\_\_\_\_ W) \_\_\_\_\_ L) \_\_\_\_\_ H) \_\_\_\_\_

4. Are you applying for a (Please circle one) **NEW STRUCTURE** **ADDITION** **OTHER DEVELOPMENT**  
(See definition of "Development")

**DEVELOPMENT:** Any man made change to improved or unimproved real estate, including but not limited to the construction, reconstruction, renovation, repair, expansion, or alteration of buildings or other structures; the placement of manufactured homes; streets, and other paving; utilities; filling, grading and excavation; mining, dredging; drilling operations; storage of equipment or materials; and the subdivision of land.

5. Proposal's Dimensions: W) \_\_\_\_\_ L) \_\_\_\_\_ H) \_\_\_\_\_ Stories \_\_\_\_\_ Total Sq. Ft. \_\_\_\_\_  
(W=Width, L=length, H-Height)

6. Description of proposal \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. Indicate the minimum distance from the new construction to the property lines in all directions in accordance with the required site or plot plan (page 3). IF you are applying for an addition, please use the initial "A" where the proposed construction is attached. **Please note: the physical address for the property is the Front for Zoning purposes**

Right side \_\_\_\_\_ ft., Left side \_\_\_\_\_ ft. to the property line.

Front side \_\_\_\_\_ ft., Rear side \_\_\_\_\_ ft. to the property line.

8. If new construction is an accessory building (garage, storage shed, etc.), indicate minimum distance to dwelling. \_\_\_\_\_ ft (Zoning code requires a minimum separation of 10')

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_

The attached plot plan on (page 3) shall be completed in full, showing the distance of all new construction from the property lines and other structures. All building and property measurements SHALL be included unless otherwise approved by the Zoning Officer. Be informed that it is the owner/applicant's responsibility to locate all property lines.

- Please be informed that this office does not have authorization to permit proposed work should this application be denied or refused. The Zoning Hearing Board has authority to grant permission to vary from what the Zoning Ordinance permits. Please be informed that:
  - ❖ If this application should be denied due to a violation regarding setbacks of the indicated district zone or due to total square footage restrictions, you may file for an Area Variance. Application is made through this office and forwarded to the Zoning Board or Appeals. Please inquire for further information and/or procedures.
  - ❖ If this application should be denied due to a discrepancy against the proposed use in the indicated district zone you may file for a Special Use Permit or a Use Variance, whichever applies. Please inquire for further information and/or procedures.

**I am the owner of this property, or an agent/applicant for the owner, for which this application is filed. If an Agent/Applicant, I certify that I have been authorized by the Owner to complete this application on their behalf.**

**As the Applicant, I certify that the information provided as part of this application is true and correct.**

Signature: \_\_\_\_\_ Print: \_\_\_\_\_

Business Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (Office): \_\_\_\_\_ (Mobile): \_\_\_\_\_

Email / Fax: \_\_\_\_\_

Estimated Cost of Project: \_\_\_\_\_

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**\*\* Please note\*\***

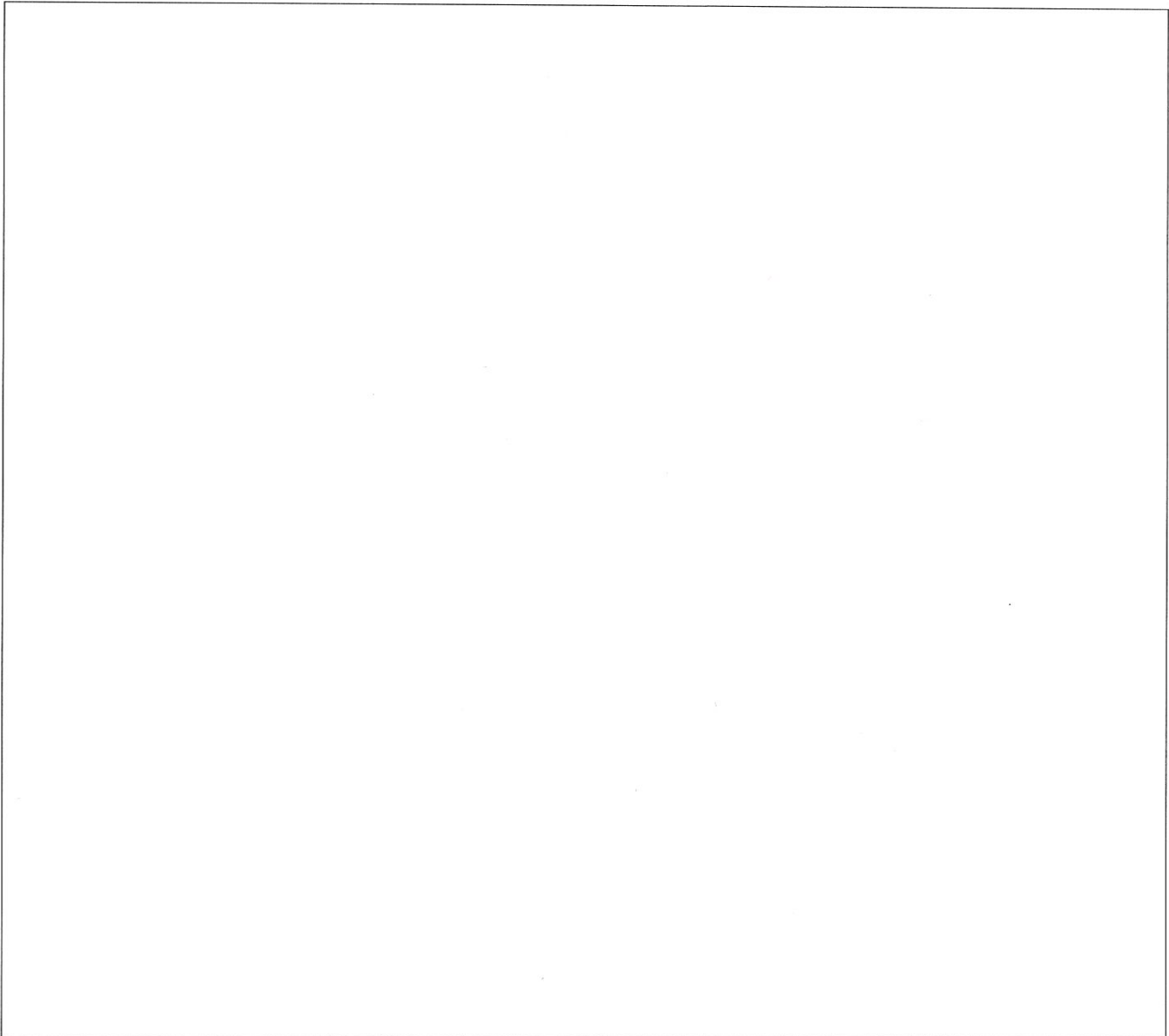
**Any Change to the scope of the submitted project MUST be submitted and approved by the Zoning Officer prior to project commencing.**  
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( 3 )

**PLOT PLAN**

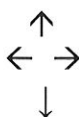
The bold lines (below) indicate the property boundary lines. All existing structures (ie: buildings, gazebos, etc.) shall be drawn in **SOLID LINES** and all proposed construction shall be drawn in **DASHED LINES** (include their dimensions and measurements from all structures to all property lines). Also, indicate where the front of the property is located, right, left, and the direction of north. Drawing is to be drawn as though you are looking down onto the property.

**NOTE:** The front property line is to be measured from the inside of the sidewalk (closest to the property, not the street). If there is **NO** sidewalk, contact us so we may help you. **The physical address for the property is the Front for Zoning purposes**



Proposed construction address: \_\_\_\_\_

Please indicate ( N. S. E. & W. )



**( Zoning Officer Action )**

The application of \_\_\_\_\_ Rec'd date of: \_\_\_\_\_ for the construction site of \_\_\_\_\_ ZONED: \_\_\_\_\_ is hereby **APPROVED DENIED** for zoning purposes only and permission **GRANTED REFUSED** for the construction, remodeling or alteration of a building and/or accessory structure as set forth above. **This is not a building permit.** When required, a building permit shall be separately applied for through the Permitting Office.

Reason for denial:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_ in violation of # \_\_\_\_\_

Zoning Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Comments/suggested options: Apply for a: Variance **USE** or **AREA, Special Exception** Permit, **Special Exception Use Permit** for a home occupation.

Comments: \_\_\_\_\_  
\_\_\_\_\_

*~ Permitting office use only ~*

This application has been:

Received By: \_\_\_\_\_ Date: \_\_\_\_\_  
( City of Bradford ~ Permitting Office)

Permit#: \_\_\_\_\_ App# \_\_\_\_\_ Issued: \_\_\_\_/\_\_\_\_/\_\_\_\_



# City of Bradford

## Business Privilege Tax Return



Attn: Services & Landlords

The Business Privilege Tax is a gross receipts tax. It is levied, under the authority of Ordinance #3101 of December 16, 1986, on all persons or entities carrying on or exercising any trade, service, profession, construction, brokering, communication, consulting or other commercial activity or service attributable to activity, an office or other place of business in the City of Bradford.

The rate of this tax is (6) mills (\$6.00 per \$1,000.00)

Failure to file this Business Privilege Tax return and pay the tax calculated to be due is a punishable offense. Regulations explaining the application of the Business Privilege Tax are available by calling Berkheimer @ 1-610-599-3140 or visiting the website @ hab-inc.com.

Resident & non-resident contractors performing work in the City of Bradford shall, before beginning work, at the time a building permit is obtained, file a return, and pay the tax due thereon based upon the amount they are receiving for performing said contractor.

\* If Applicant is the Owner & Contractor of property that is requiring a permit ~ No BPT will be applied \*

**\*\* All Information on this form is Confidential \*\***

**For office use only:**

Building permit #: \_\_\_\_\_ Parcel ID#: \_\_\_\_\_

Address: \_\_\_\_\_

**Total cost of work performed** \$ \_\_\_\_\_

**x's .006 = Total Tax Due** \$ \_\_\_\_\_

**Contractor:** \_\_\_\_\_ **Phone#:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_  
( Authorized Signature )

\_\_\_\_\_  
( Date )

**Please make checks payable to: Bradford City Treasurer**

City of Bradford  
24 Kennedy Street  
Bradford, PA 16701