

Lower Southampton Township

Bucks County, Pennsylvania 1500 Desire Avenue – Feasterville, PA 19053

Phone: (215) 357-7300 – E-Mail: permits@lstwp.org

OFFICE USE ONLY			
FEE:			
PERMIT NO.:			

DRIVEWAY PERMIT APPLICATION				
I. SITE INFORMATION (Each line item MUST be completed)				
Proposed Work Site Address:				
Tax Parcel ID:				
Property within Floodplain:	Yes No			
II. CONTACT INFORMATION	Each line item MUST be completed)	Please be advised: ONLY applicant receives co	rrespondence and/or permit	
Applicant Name:				
Mailing Address:	City:	State:	Zip:	
E-Mail:	Phone No.:			
Property Owner:				
Mailing Address:	City:	State:	Zip:	
E-Mail:	Phone No.:			
Contractor:				
Person in Charge of Work:				
Mailing Address:	City:	State:	Zip:	
E-Mail:	Phone No.:			
III. PROJECT DATA (Each line item MUST be completed)				
Resurface Driveway Enlarge Driveway				
Driveway Original Dimensions: Length Width				
Driveway Enlarged Dimensions: Length Width				
Total Project Cost: \$				
DRIVEWAY ENLARGEMENT REQUIRES A PLOT PLAN AND IMPERVIOUS SURFACE CALCULATION				
Impervious Surface Calculation must itemize the square footage of the following: House – Detached Garage – Driveway – Shed – Patio – Covered Deck – In Ground Pool Decking				
IV. APPLICANT'S CERTIFICATION (Signature REQUIRED)				
The undersigned owner or authorized agent hereby certify that:				
 All information provided as a part of this application is true and correct. This project will be constructed in accordance with the approved drawings and specifications (including any non-design changes) and the Uniform Construction Code standards as specified in 34PA Code Chapters 401-405. That all work will be performed and completed in accordance with the rules and regulations set forth in Lower Southampton Twp. ordinance and may require Township Engineer review. 				
Signature of Applicant:		Date:		
OFFICE USE ONLY				
Zoning Officer Decision A	pproved Denied			
Zoning Officers Signature:		Date:		