ssue Date	Zoning District	Date Stamp
Tax Parcel No		
Permit Fee	Permit No	
Expiration Date		
	NING PERMIT APPLICATION FACT SHE	
	Accessory Building / Sto all structures under 1000 sq.ft. c	-
Municipality Alsace Township		
Name	Phone No.	,———
Phone NoAddress	O 0 11 M	
	Estimated C	ost
SubdivisionL Lot Size	ot No	
Complete the diagram. Show a	Il dimensions from property lines and	easements for all existing structures – if required. Sheds cannot be placed in
Side Property Line		Side Property Line
	Front Property Line	
NOTE: If applic	cable, you must show location of on-lo	ot septic system
II. Dimensions:		. ,
1. Building Size: Wi	dth Length	Height
	ft. No. of stories:	3099
', -		
••	bricated Built on-site	Pole-building Consists Foundation Consists Foundation Consists Foundation Consists Foundation Consists Foundation Consists Foundation Consists Foundation C
	☐ Gravel Bed ☐ Concrete Slab ☐	6x6 ties w/stone ☐ Concrete Foundation ☐
IV. Electric: Yes No		
FINAL INSPECTION REQUIRE	ED - CALL TECHNICON ENTE	ERPRISES, INC. II (610) 286-1622
Applicant		Date
••		
Code Enforcement/Zoning Officer		Date
□ INSPECTION APPROVED □	INSPECTION DISAPPROVED IN	NSPECTION DATE