

# CODE ENFORCEMENT OFFICE

Whitpain Township  
960 Wentz Road  
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Blue Bell, PA 19422-0800  
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Phone: (610)-277-2400  
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Office Hours: Mon. – Fri. 1-2 p.m.  
& By Appointment

## APPLICATION FOR COMMERCIAL ZONING PERMIT

APPLICANT	
Name:	_____
Address:	_____
Phone:	_____
Fax:	_____
Email:	_____

PROPERTY OWNER	
Name:	_____
Address:	_____
Phone:	_____
Fax:	_____
Email:	_____

Business Name: \_\_\_\_\_  
Hours of Operation: \_\_\_\_\_  
Job Address: \_\_\_\_\_  
Bldg: \_\_\_\_\_ Suite: \_\_\_\_\_  
Proposed Use: \_\_\_\_\_

1. Has a land development plan been submitted to the Township Engineer for approval?    Y    N
2. Are you requesting a waiver of the requirement to obtain land development plan approval from the Township Engineer?    Y    N
3. If answer to #2 above is yes, then answer the following:

Building Height \_\_\_\_\_, Length \_\_\_\_\_, Width \_\_\_\_\_, Distance Off Lot Line \_\_\_\_\_

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Property owner or Agent For Owner

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Printed Name of Owner or Agent

**OWNER (OR CURRENT RESIDENT AGENT FOR OWNER) MUST SIGN THIS APPLICATION  
TWO (2) COPIES OF SITE PLANS MUST ACCOMPANY THIS APPLICATION  
A COMPLETED EMERGENCY CONTACT LISTING MUST BE SUBMITTED WITH THIS APPLICATION  
INCOMPLETE OR CURRENT RESIDENT INCORRECT APPLICATION WILL BE RETURNED  
DO NOT BEGIN WORK UNTIL PERMIT IS ISSUED**

### FOR OFFICE USE ONLY

Date Issued: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_

Permit #: \_\_\_\_\_  
Approved By: \_\_\_\_\_