



**CITY OF BEAVER FALLS**  
 CODE ENFORCEMENT & ZONING OFFICE  
 715 FIFTEENTH STREET, BEAVER FALLS, PA 15010  
 OFFICE: (724) 847- 2808 EXT. 219  
 FAX: (724) 847-4748  
 WWW.BEAVERFALLSPA.ORG

*SUBDIVISION AND/OR  
 LAND DEVELOPMENT APPLICATION*

**I. TYPE OF APPLICATION**

Check One: <input type="checkbox"/> Subdivision	<input type="checkbox"/> Lot Consolidation	<input type="checkbox"/> Lot Line Change	<input type="checkbox"/> Land Development	<input checked="" type="checkbox"/> Use Change	<input type="checkbox"/> Other
Check One: <input type="checkbox"/> Sketch Plan	<input type="checkbox"/> Preliminary Plan	<input type="checkbox"/> Final Plan	<input type="checkbox"/> Combined P/F	<input type="checkbox"/> Minor/ Plan Amendment	

**II. APPLICANT INFORMATION:**

PROPERTY OWNER:

ADDRESS:

CITY, STATE, ZIP:

DAYTIME PHONE: ( ) CELL PHONE: ( ) FAX: ( )

EMAIL:

APPLICANT NAME (if different from the Owner's):

ADDRESS:

CITY, STATE, ZIP:

DAYTIME PHONE: ( ) CELL PHONE: ( ) FAX: ( )

EMAIL:

Applicant's interest in the property in question, or relationship to property owner:

Equitable Owner (property under agreement of sale)  Lessee

Authorized Agent:  Attorney  Engineer  Architect  Other:

Will the Applicant be the point of contact for City correspondence about this plan?  
 If no, provide name and contact information for the point of contact.  Yes  No

CONTACT NAME/COMPANY:

ADDRESS:

CITY, STATE, ZIP:

DAYTIME PHONE: ( ) CELL PHONE: ( ) FAX: ( )

EMAIL:

**III. PROPERTY INFORMATION:**

ADDRESS/ LOCATION OF PROPERTY:			Tax Parcel Number(s):			Lot and Block ID:		
ZONING DISTRICT:	<input type="checkbox"/> R-1A Residential	<input type="checkbox"/> R-1B Residential	<input type="checkbox"/> R-2 Residential	<input type="checkbox"/> SGD South Gateway District	<input type="checkbox"/> DSD Downtown South District	<input type="checkbox"/> DCD Downtown Central District		
	<input type="checkbox"/> DND Downtown North District		<input type="checkbox"/> C-2 Commercial	<input type="checkbox"/> CLI Commercial/ Light Industrial	<input type="checkbox"/> CON Conservation	<input type="checkbox"/> I Industrial	<input type="checkbox"/> PEI Public/ Educational/ Institutional	
Name of subdivision or land development (if any):								
Current Use:								
Total acreage of lots(s):				Acreage to be developed:				
No. of existing lots:				No. of proposed lots:				
Existing total gross floor area (s.f.):				Proposed total gross floor area:				

**IV. PROJECT INFORMATION:**

Submit a brief narrative summary of the project. The narrative must describe:

1. current state of the property;
2. the proposed use of the site and, if appropriate, how it will differ from the existing use;
3. number of lots to be consolidated or created and/or proposed development of the site; and
4. any variances or waivers requested or previously granted for the plan;
5. any additional information that may be pertinent to the reviewing parties.

**Please answer each of the following questions/statements. Provide as much information and be as specific as possible. (Use additional sheets id necessary)**

1. What is the purpose of this project?

2. Describe the current or previous use of the property. Is this proposed use permitted in the current zoning district?

3. Describe the project's positive impact on the neighborhood.

4. How many off-street parking spaces are being provided for the use? Where are they being provided?

5. Does this meet the requirements of the zoning code?

6. How will vehicles/pedestrians access the property?

7. Is the property located in a floodplain?

8. Please provide any additional information you feel is pertinent to the application.

9. Description of all streets and right-of-way on or abutting property to be developed or subdivided.

10. Description of any proposed restrictive covenants planned for new lot (s).

**Please provide the following information about this project:**

1) Proposed use permitted by:

- Right       Variance       Conditional Use/ Special exception       Other \_\_\_\_\_

2) Have necessary City approvals been granted?

- Type: \_\_\_\_\_  Yes       No      Date: \_\_\_\_\_  
Type: \_\_\_\_\_  Yes       No      Date: \_\_\_\_\_

3) Have appropriate Public Utilities been consulted?       Yes       No

- Current Water Supply:       Public       Other (specify) \_\_\_\_\_  
Proposed Water Supply:       Public       Other (specify) \_\_\_\_\_  
Current Sewage Disposal:       Public       Other (specify) \_\_\_\_\_  
Proposed Sewage Disposal:       Public       Other (specify) \_\_\_\_\_

4) New Street/Extension of Existing Street:       Yes       No

- If yes, is the new street:       Public       Private

5) Improvements to be dedicated to the City:

- Street or Right-of-Way       Streetlights       Sanitary Sewer Line       Easements  
 Stormwater       Other

6) Are easements required with adjacent property owners?       Yes       No

- If yes, are easement agreements in place?       Yes       No (elaborate if not sure)

7) Economic Analysis:

- Construction Value of Project:      \$ \_\_\_\_\_  
Total Value of Project:      \$ \_\_\_\_\_

Plans and studies included with this submission (check all that apply):

- Site Plan                       Stormwater Management Plan                       Grading and Utilities                       Landscaping  
 Profiles and Details                       Traffic                       Shadow Analysis                       Lighting  
 Sedimentation and Erosion Control                       Architectural Elevations and Floor Plan                       Natural Features Conservation  
 Other: \_\_\_\_\_

Approvals from outside agencies (for Final Plan reviews, Applicant must demonstrate that necessary approvals are either in place or being sought).

Agency	Required?		Date of Approval
PA Dept. of Environmental Protection	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
PA Dept. of Transportation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Beaver County Conservation	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Other: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____
Other: _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No	_____

**V. NOTICES FOR APPLICANT:**

**READ, UNDERSTAND AND COMPLY WITH THE FOLLOWING NOTICES**

**NOTICE:** In addition to a zoning permit, if the subject property does or will require access to a public road or street, and/or will require improvement/change of curb to have access to a public road or street: If such State road or street is under the jurisdiction of the Commonwealth of Pennsylvania, you must obtain a Highway Occupancy Permit pursuant to Act No. 428 of 1945, as amended, known as the "State Highway Law"; Application for such Highway Occupancy Permit as to a Commonwealth road or street must be made to, with and processed by the Pennsylvania Department of Transportation. If such road or street is under the jurisdiction of City of Beaver Falls, you must apply for and obtain a Curb Cut application from the City.

**NOTICE:** In addition to a zoning permit, you may need to obtain other applications and permits for the development you propose, including but not limited to, depending on location of your premises, for sewage tap-in permit for connection to a public sewer, water connection permit (to be obtained from the Beaver Falls Municipal Water Authority, and/or Land Development approval, prior to being able to commence construction. Furthermore, following construction and prior to your placing into use the proposed structure/building, you will need to procure an UCC building permit from the City's Third Party Agency, MDIA. Also, if building onto several parcels the property will need to be consolidated before construction starts.

**NOTICE:** Property Owner or Project Owner or Applicant is responsible for any fees accrued with Widmer's Engineering, City Engineer, for any services provided for this project, such as Stormwater Management Plan, site plan reviews.

**NOTICE:** Contractor prohibited by law from employing any individual to perform work pursuant to this zoning permit unless contractor provides proof of worker's compensation to the City of Beaver Falls. Contractor also prohibited by law as to building or remodeling under subject Permit from engaging the services of a subcontractor unless subcontractor maintains workers' compensation insurance coverage as to subcontractor's employees. Failure of Contractor and Applicant for this Permit to maintain worker's compensation insurance according to law of Commonwealth of Pennsylvania requires stoppage of all construction/work under Zoning Permit issued and a Zoning Permit may be revoked.

**NOTICE:** Property owner is responsible for determining if property is subject to private covenants or private plan restrictions and compliance with the restrictions. Private covenants may be more restrictive than zoning regulations. Issuance of a building or zoning permit does not constitute compliance with private covenants or restrictions. Permits issued in violation of any private covenants or restrictions are the sole responsibility of the property owner or their authorized representative.

**Items To Be Submitted With This Application.**

Failure to do so WILL delay the review process.

- Check made payable to the "City of Beaver Falls" for the correct amount:  
\$125 plus \$25 per lot
- Beaver County Planning Commission Application and fee (check payable to "Beaver County Planning Commission"):  
Subdivision: \$75.00 Plus \$10 Per Lot  
Land Dev.: \$75.00 Plus \$10 Per Acre
- Twenty (20) copies of plans required:
  - o Four (4) sets of 24" x 36"
  - o Sixteen (16) sets of 11" x 17" of half size (Fold Plans are appreciated)
  - o If available, send electronic copy to: [erose@beaverfallspa.org](mailto:erose@beaverfallspa.org)
- Landscaping Plan
- Lighting Plan
- Stormwater Management Plans
- Traffic Study (if required by the City Engineer)
- Parking and circulation plan

**NOTE: City Planning Commission meets the 2<sup>nd</sup> Thursday each month and the County Planning Commission meets the 3<sup>rd</sup> Tuesday each month. The completed application with materials must be submitted to the City no later than thirty (30) days prior to any Planning Commission meeting.**

**APPLICANT / OWNER CERTIFICATION**

*I hereby certify that the proposed work is authorized by the owner of record and that I agree to conform to all applicable laws of this jurisdiction. I understand that any falsification could lead to denial or criminal penalties, or revocation of any permit pursuant to this application. I agree that work will not commence prior to final approval.*

Applicant - Print	Applicant's Signature	Date
Property Owner - Print	Property Owner's Signature	Date

*The owner must sign this application. The applicant signature is required when different from owner.*

**VI. VALIDATION: (OFFICE USE ONLY)**

SUMMARY OF FEES		SITE PLAN/ SUBDIVISION/LAND DEVELOPMENT:		
CITY PLAN REVIEW FEE	\$	BOARD	DECISION (CIRCLE ONE):	DATE:
		<i>City Planning Commission</i>	RECOMMENDED / NOT RECOMMENDED	
		<i>Beaver Co. Planning Comm.</i>	APPROVED / DISAPPROVED	
		<i>City Council</i>	APPROVED / DISAPPROVED	
APPLICATION No:				

**Comments:**

---



---

I hereby certify that I have reviewed the information on this application and have advised the applicant of the necessity to comply with the Zoning Ordinance and other applicable ordinances.

ZONING OFFICER	DATE
----------------	------