ZONING, HISTORIC DISTRICT AND FLOOD HAZARD SIGNOFF

LOC	CATION OF PROPERTY:	-					
LOT	C& BLOCK OR PARCEL NU	JMBER:					
			COUNTY:				
	OWNER NAME:				=		
	OWNER NAME:ADDRESS:					ar .	
CITY:		STATE:		ZIP:			
	PHONE: ()			-	, ,		
						A S	
	APPLICANT NAME:					. 7	•
	ADDRESS:						. 6
	CITY:			ZIP:			
	PHONE: ()			, and	2		
• A T S A	CHIS FORM APPLICANT/OWNER IS RESPONS THE PA DEPT. OF TRANSPORTA A § 670-420, AS WELL AS COMPL AUTHORITY WHETHER SPECIFIE AUTHORITY WHETHER	TION AS REQUIRED JANCE WITH THE RI ED OR NOT.	UNDER SECTION EQUIREMENTS O	402 OF THE ST F THE MUNICI	TATE HIGH PAL SEWE	WAY LAV R AND W	W (36 P.
ZONING SIGNOFF ADDITIONAL COMMENTS:		O APPROVED					
HISTORICAL DISTRICT SIGNOFF ADDITIONAL COMMENTS:		O APPROVED	O DOES NO	O DOES NOT APPLY			
	DD HAZARD AREA	IF YES COMPLIANCE W					
1111	DITIONAL COMMENTS:						
BY:	SIGNATURE:		TITI	LE:		1998	_
	PRINT NAME:		DATE:				
	PHONE NUMBER: ()						