



**Penn Forest Township •**  
**2010 State Route 903 • Jim Thorpe, PA 18229**  
**Phone • (570) 325-2768 or (570) 325-2769**

**\*\* OFFICE USE ONLY \*\***

Date Received: \_\_\_\_\_  
 Zoning District: \_\_\_\_\_  
 Tax Parcel No.: \_\_\_\_\_  
 Zoning Permit No.: \_\_\_\_\_

**APPLICATION FOR ZONING PERMIT SHORT-TERM RENTAL**

Application is hereby made for a permit in conformity with requirements of the Pennsylvania Municipalities Planning Code, Current Local Zoning Ordinance and any amendments thereto for the following described work:

**I. PROPERTY INFORMATION**

Single Family Detached       Twin Dwelling Units       Townhouses/ Rowhouses       Apartments

Municipality: \_\_\_\_\_ Development: \_\_\_\_\_ Lot: \_\_\_\_\_ Section: \_\_\_\_\_

Address of Short Term Rental: \_\_\_\_\_ Tax Parcel ID: \_\_\_\_\_

Lot Width: \_\_\_\_\_ Lot Depth: \_\_\_\_\_ Lot Size: \_\_\_\_\_  
(Acres or Sq.ft.)

Property within Floodplain  Yes  No      If Yes, Market Value of Property: \_\_\_\_\_

Do you have an elevation certificate  Yes  No      If Yes, please attach a copy with submission

Property located in Historic District  Yes  No      If Yes, also complete the Application for COA

**II. CONTACT INFORMATION**

**Applicant:** \_\_\_\_\_ email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

*(If different than Applicant)*  
**Property Owner:** \_\_\_\_\_ email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**24 Hr. Contact Person:** \_\_\_\_\_ email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**III. SPECIFICATIONS**

- Change of use: License # STR \_\_\_\_ - \_\_\_\_\_
- Number of Bedrooms: \_\_\_\_\_
- Maximum Number of Overnight Occupants: \_\_\_\_\_
- Maximum # of Off Street Parking Spaces (minimum 9'x18' parking spaces): \_\_\_\_\_
- Maximum number of Vehicles for Overnight Occupants: \_\_\_\_\_

I hereby authorize the Municipality Staff to perform inspections related to this application as may be required between the hours of 8 AM and 8 PM. The applicant understands and agrees to comply with the Pennsylvania Municipal Planning Code and Zoning Ordinance, as amended. All information supporting this application shall become part of the records of the Municipality, cannot be returned and may be examined by the public at any time during the normal working hours of the Municipal Office.

Application is hereby made for a permit to erect or alter a structure which shall be located as shown on the attached diagram/plot plan and/or to use the premises for the purposes herewith. The information which precedes, together with the plot plan/diagram, is made part of this application by the undersigned. It is understood and agreed by the applicant that any error, misstatement or misrepresentation of material, fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application or any change in the location, size or use of structure or land made subsequent to the issuance of this permit without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit.

**Applicant Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Owner Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**BOTH SIGNATURES ARE REQUIRED IF APPLICANT IS DIFFERENT THAN OWNER**

**\*\* OFFICE USE ONLY \*\***

**Meeting Dates (if applicable)**

Historic: \_\_\_\_\_

Approved:  Yes  No

ZHB: \_\_\_\_\_

Approved:  Yes  No

Planning: \_\_\_\_\_

Approved:  Yes  No

Other: \_\_\_\_\_

Approved:  Yes  No

**PA UCC Construction Permit Required:**  Yes  No

**Action Taken:**  Approved  Denied

Zoning Fee: \_\_\_\_\_

Application Fee Paid: \_\_\_\_\_

Balance Due: \_\_\_\_\_

Date Paid: \_\_\_\_\_

**Zoning Officer Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

If the permit is denied, the zoning officer shall note the applicable sections/basis of denial below:

---

---

---

---

A copy of the zoning officer's official letter of denial shall be attached to this application.