



TOWNSHIP OF

Hampton

COMMERCIAL ZONING APPROVAL
CONSTRUCTION PERMIT – ACCESSORY STRUCTURES

★ SUBMISSION TO CODE.SYS FOR PLAN REVIEW MAY BE REQUIRED.
PLEASE CONTACT THE PERMIT OFFICE FOR MORE INFORMATION

Please submit the following items with the completed application:

- A copy of an official stamped survey that shows the proposed location of the structure relative to existing and/or proposed buildings, property boundaries, rights-of-way and elevations.
- Please turn in a completed application filled out in blue or black ink.

Also, please be aware of the following:

The fee for this permit is \$75.00. Payment is due upon issuance of the permit. Please bring payment when you pick up the permit. The permit will not be released until payment has been received. We accept check or cash. All checks are made payable to: “**Township of Hampton**”

For Solar Panel Applications, an additional \$20 fee is added for the required photovoltaic sign. For additional information on submission requirements please reference the Township of Hampton’s Solar Panel Ordinance Number 813.

For any side of the yard that abuts a roadway the setbacks are measured from the edge of the right of way.

If the accessory structure is to be placed within 50% of the minimum required setback, the township will require the property line to be staked for the final inspection. We recommend that it be staked before construction begins.

Applicants should refer to the Township of Hampton Zoning Ordinance available at www.hampton-pa.org for further information on accessory structures and the Township lighting standards.

Structures over 400 square feet will require storm water controls. Please submit plans showing the design and location of the controls. Sump specifications and application can be found on the website (above).

The fee for the electrical permit and associated inspection(s) is not included in the building permit fees. When you are ready for an inspection, contact the electrical inspector directly and he will issue the permit and collect the fee on site during the inspection.

Electrical Inspector – Code.sys – Gene Meaner (412)821-0337 ext. 39

There will be an additional charge for re-inspections that exceed two or more of the allotted number of inspections that are listed on the building permit.



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1. Name of Property Owner _____ Phone # _____

Address _____ Fax # _____

2. Name of Applicant _____ Phone # _____

Address _____ Fax # _____

* Is this property a corner lot? Yes No Zoning Classification: _____

* Will this structure eventually be connected to the primary structure? Yes No

3. Proposed uses(s) please check those that apply: (*List square footage*)

- Shed (Under 1,000 feet) **Detached** garage (Under 1,000 square feet)
 Fence (equal to or less than feet in height) Other (under 1,000 feet), Please specify: _____

4. Size of Structure: Length: _____ Width: _____

Height of Structure from average grade level _____ ft.

Location of Structure on the Lot: (Submit copy of survey w/easements shown)

5. Setbacks: The Township of Hampton Zoning Ordinance regulates how far structures must be from all property lines. Please provide the following information regarding the distance from each property line to the proposed location of your structure. **This section MUST be filled in completely or the application will not be accepted.** Please also mark the setback values on the stamped survey to be included with this application.

Setback from street right-of-way _____ ft. Setback from rear prop. line _____ ft.

RIGHT side of structure to RIGHT prop. line _____ ft.

LEFT side of structure to LEFT prop. Line _____ ft.



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6. Estimated Cost of Proposed Accessory Structure: \$ _____

7. Building Material of Proposed Accessory Structure: _____

Color of Proposed Accessory Structure: _____

8. I hereby acknowledge the information contained herein is true and correct, and I hereby agree that all applicable provisions of the Hampton Township Codes shall be complied with.

Applicant-Signature _____ Date _____

Print Name _____

E-mail Address (optional) _____



3101 McCully Road, Allison Park, Pennsylvania 15101 ♦ Area Code 412-486-0400
412-443-7585
Fax: 412-486-5019

TOWNSHIP OF HAMPTON
RELEASE FORM

This page must be signed and dated by the property owners.

I / We, _____,

being the owner or owners of the property listed below, located at _____

_____, agree to *HOLD HARMLESS* the Township of Hampton of any and all legal responsibilities in the removal of fence, hedge, post, mailbox, sign, wall, tree or shrub which has been placed over the road right-of-way easement for utilities, as per Ordinance 627. Article 11, Section 11.600. Subsection 11.640 at the above location, should it ever become necessary to remove same for maintenance purposes. In addition, I/We recognize that the installation of any structure within an easement or right-of-way (ROW) is restricted by section 11.600 of the Township's Zoning Ordinance. If any easements and/or right-of-ways exist that were not included on the submitted survey/plan, I/We assume all responsibilities for compliance with Township Zoning Ordinance restrictions regarding placement of any structure in these areas.

Further, this **RELEASE FORM** is to be made a part of, and recorded with the building permit issued on the above property.

Owner

Date

Owner

Date

Section 11.640: Any fence, hedge, post, mailbox, sign, wall, tree or shrub located in a public right-of-way or other recorded easement is placed at the owner's risk and may be ordered removed by the Township or other public utility or authority for expansion or maintenance of public services.

(FOR TOWNSHIP USE ONLY – PLEASE DO NOT WRITE BELOW THIS LINE)

ZA #: _____	Date Received: _____
Received By: _____	Check# _____
Fee: \$ 75.00 _____	Cash _____
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>	Approval Date: _____
Field Verification Approval: Yes <input type="checkbox"/> No <input type="checkbox"/>	Date of Approval: _____
Building Code Official _____	