

**BOROUGH OF MAYFIELD
LACKAWANNA COUNTY
COMMONWEALTH OF PENNSYLVANIA
ZONING PERMIT APPLICATION**

Borough Use Only

Date Received

Received By

Fee Received

Map No. _____ Block _____ Lot _____

SECTION A - General Information

1. Applicant Name : _____
 Mailing Address : _____

 Telephone Number : () _____

2. Landowner of Record Name : _____
 Mailing Address : _____

 Telephone Number : () _____

3. Subject Property Address : _____

4. Subject Property Zone : _____

5. Contractor/Architect: _____
 Mailing Address : _____

 Telephone Number : () _____

check box(s) that apply

- Work to be done by Owner. Attach completed Workman's Compensation Affidavit

- Work to be done by a Contractor.

- Valid Insurance Certificate on file with the Borough.

- Insurance Certificate attached.

6. General Description of Proposed Use : _____

