



Lower Macungie Township

3400 Brookside Road Macungie Pa. 18062

(610) 966-4343 - (610) 965-365 FAX

permits@lowermac.com

Emergency Contact
Form on Next Page

Business Use Permit Application

A plot plan clearly drawn to scale and legibly labeled showing all areas of the property and/or Building proposed for use and all other uses of the building must be submitted with this application.

Name of Proposed Business _____

Property Address _____ Intended Date of Occupancy _____

Total Size of Building _____ Sq. Ft. Total Space to be Occupied _____ Sq. Ft.

Tenant/Lessee Name _____

Address _____ Contact Person _____ Phone _____

Property Owner _____

Address _____ Phone _____

Person Responsible For Facility _____

Work Phone _____ Cell Phone _____

Description of Proposed Use _____

Days and Hours of Operation _____

Number of Employees Per Shift 1st _____ 2nd _____ 3rd _____

Number of Trucks per Day In _____ Out _____ Parked Overnight _____

Number of Parking Spaces Provided _____ Number of Loading Spaces Provided _____

Does the Use involve Handling or Manufacturing of Materials Requiring Special Consideration Yes No

(Please Include Material Safety Data Sheets for Each Material or Substance)

Former Occupant of Property/Building _____

Former Use of Property/Building _____

Size of Space Formerly Occupied _____ Sq Ft. Date Former Use Terminated _____

Days and Hours of Operation _____

The undersigned does hereby certify that the above information is true and correct and that the operation of this use shall be in compliance with the requirements of the Zoning Ordinance. The tenant/lessee further acknowledges that the provision of false or incomplete information or violation of any of the requirements of the Zoning Ordinance and/or applicable Building, Plumbing, Mechanical, Electrical, Fire or Handicap Accessibility Codes can result in the revocation of any approval and/or the commencement of an enforcement action to abate such violation. This approval is not a Certificate of Occupancy or Letter of Compliance to occupy the building, structure or land. A separate approval may be required prior to occupancy.

Signature of Property Owner _____ Date _____

Signature of Tenant/Lessee _____ Date _____

USE PERMITTED BY: _____ ZONING DISTRICT: _____
APPROVED BY: _____ DATE: _____
BUSINESS USE FEE - \$75.00 PAID: _____



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EMERGENCY CONTACT FORM

Date _____

Company Name _____

Mailing Address _____

Physical Address _____

Phone _____ Email _____

Business Type _____

Owner(s) _____

EMERGENCY CONTACTS:

1st	_____	
Name	Title	
_____	_____	
Home Phone	Cell Phone	Email Address

2ND	_____	
Name	Title	
_____	_____	
Home Phone	Cell Phone	Email Address

3rd	_____	
Name	Title	
_____	_____	
Home Phone	Cell Phone	Email Address

If this information changes, please remit the new information to:

permits@lowermac.com

Rapid Entry Key Lock Box – New tenants, lock changes, new doors, gates or panels – Property owner shall contact the Code Enforcement Officer to update the keys/contact information.