

Zoning Activity Permit  
City of Williamsport  
Bureau of Codes

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

**Requirements**

1. Diagram location drawing of all items within the permitted area.
2. All items must be within property boundaries.
3. A right-of-way for pedestrian traffic **must** be maintained.
4. All items must be removed by 1 November, 2015.

**Dates of Activity:**

**Permitted only from March thru October of each year**

**From:** \_\_\_\_\_ **To:** \_\_\_\_\_, 2015

**Description of Activity:** *(please provide a brief statement of all items to be placed on sidewalk)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

This permit may be revoked for any activities being conducted which would interfere with the Life, Health and Safety, welfare of the Community and which would be aesthetically or physically detrimental to the Downtown Merchants "Mall".

**THIS PERMIT EXPIRES ON NOVEMBER 1, 2015**

**Signature of Applicant** \_\_\_\_\_

I the above signed agree to all terms and conditions of this "Mall Permit" and understand that if any activities violate the above stated that it may be revoked.

Permit Fee: \$ 20.00

Year 2015

**Official Use Only**

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Approved: \_\_\_\_\_ Denied: \_\_\_\_\_ Reason \_\_\_\_\_

\_\_\_\_\_

Fees received by: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Official: \_\_\_\_\_ Date: \_\_\_\_\_