



Borough of Mars

598 Spring Ave.
Ph: (724) 625-1858
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Application For Accessory Structure Permit

Type of Structure: Shed/play house (less than 64 sq ft) _____ (Greater than 64 sq ft) _____ Gazebo _____ Car port _____
Deck/Patio: (if less than 30" above ground) _____ Garage _____ (if less than 1,000 sq ft) Retaining Wall _____

DESCRIPTION OF PROJECT: _____
ADDRESS WHERE PROJECT WILL BE PLACED: _____
APPLICANT'S NAME: _____ PHONE NUMBER: _____
APPLICANT'S MAILING ADDRESS: _____ STATE: _____ ZIP CODE: _____
FAX NUMBER: _____ E-MAIL: (Optional) _____

OWNER'S NAME: _____ PHONE NUMBER: _____
OWNER'S MAILING ADDRESS: _____ STATE: _____ ZIP CODE: _____
ZONING DISTRICT: ____ ARE THERE ANY OTHER ACCESSORY STRUCTURES ON PROPERTY? _____
IF SO DESCRIBE: _____
WHERE WILL PROJECT BE LOCATED: FRONT ____ REAR ____ LEFT SIDE ____ RIGHT SIDE ____ YARD
SIZE OF STRUCTURE: HEIGHT: ____ FT. ____ IN. LENGTH: ____ FT. ____ IN. WIDTH: ____ FT. ____ IN.
HOW WILL STRUCTURE BE ATTACHED TO GROUND? _____
WILL THERE BE ELECTRIC AT THE STRUCTURE: YES ____ NO ____ (Electrical permit may be needed)
CONSTRUCTION COST: _____
APPLICANTS SIGNATURE: _____ DATE: _____

SKETCH OF PROPOSED LOCATION INCLUDE ALL OTHER STRUCTURES

FOR OFFICIAL USE ONLY

APPROVED BY: _____ ZONING OFFICIAL PERMIT COST \$ _____
APPROVED: YES ____ NO ____ DATE: _____ PERMIT NUMBER: _____

MAKE ALL CHECKS PAYABLE TO THE BOROUGH OF MARS

MAIL TO PO BOX 395, MARS, PA 16046-0395