



Hereford Township
 Berks County, Pennsylvania
 3131 Seisholtzville Rd
 Macungie, PA 18062
 Main: (610)-845-2929 – Fax: (610)-845-0616
 Website: www.herefordtownship.org

Official Use Only

Date received: _____ Received by: _____
 Payment Type: _____ Amount Received: _____ Date Received: _____
 Tax Parcel No.: _____ Permit Fee: \$125.00

****Notice to Applicants:** Information on this form is public information and may be accessed by third parties in accordance with and subject to the requirements of the "Open Records Law"

Is there a legal reason your information should not be shared with a third party agency or available for public inspection: Yes No — If yes, please explain: _____

Junkyard License

Name of Applicant: _____

Street Address _____ City _____ State _____ Zip _____

Phone Number: _____ Email: _____

Name of Junkyard: _____ Size of Junk Yard: _____

Location of Junkyard: _____
 Street Address _____ City _____ State _____ Zip _____

Is this license application for an automobile junkyard? Yes No

If No, what type of Junkyard: _____

License is desired for the calendar year ending December 31, 20_____

Date on which junkyard operation began or will begin: _____

I hereby apply for a license to operate a junkyard as required by Section 3 of Ordinance No. 1970-4 of the Township of Hereford, Berks County, Pa., enacted on the 8th day of September 1970, and further amended by Ordinance No. 1983-1 enacted on the 3rd day of January 1983, certify that the facts set forth above are true and correct, and agree that I will operate in strict accordance with the provisions of said Ordinances.

 Signature of Applicant

Note: Attach a survey print of the premises used or to be used in connection with the operation of the junkyard for which this application is made clearly showing thereon all buildings to be used in connection with the junkyard, the relationship in distances of each building to the setback lines as set forth in Section 9(g) of the Ordinance, any and all buildings on all property adjoining the licensed premises, and the areas to be used for storage.

Technicon Enterprises, Inc., II – Final Inspection Required – Call (610) 286-1622

Zoning Enforcement Officer: _____ Date Permit Approved: _____

Inspection Approved Inspection Disapproved Inspection Date: _____

(Technicon Enterprises, Inc., II – Please return Inspection information upon completion)

When scheduling inspections, the contractor must ensure he has completed all items necessary for the inspection. Should the Building Inspector/Zoning Officer be required to make additional inspections, a fee of \$80.00 will be due to defray the cost of the inspection. The entire fee must be paid prior to the inspection. The fee is paid to the Municipality.