

CONESTOGA TOWNSHIP
CONDITIONAL USE APPLICATION

PART I: APPLICANT INFORMATION

1. Applicant Name(s): _____

Address: _____

Phone Number: (____) _____ Fax Number: (____) _____

E-mail: _____

2. Property Owner Name(s)*: _____

Address: _____

* If applicant is not the owner of subject property, an affidavit stating that the owner consents to the conditional use is required.

3. Firm Which Prepared Plan: _____

Project/Plan Number: _____ Plan Date: _____

Name of Contact Person(s) for Plan: _____

Address: _____

Phone Number: (____) _____ Fax Number: (____) _____

E-mail: _____

4. Legal Representative or Planning Consultant: _____

Name of Contact Person(s): _____

Address: _____

Phone Number: (____) _____ Fax Number (____) _____

E-Mail: _____

PART II: PROJECT INFORMATION

4. Project Name: _____

Location: _____

Zoning District: _____ Tax Map #: _____ Deed Reference #: _____

Sections Permitting Use as C.U. and Establishing Criteria: _____

5. Project Description:

Existing Use(s): _____

Proposed Use(s): _____

Total Square Footage / Acreage of Subject Lot: _____ sq. ft. / _____ acres

Total Square Footage of Principal Structure: _____ sq.ft. (if applicable)

Proposed Number of lots: _____ Proposed Number of Dwelling Units: _____

Proposed Density: _____ dwellings/acre

6. Will the project be served by public water and sewer service? YES NO

PART III: CONDITIONAL USE CRITERIA

Applicant must show, by credible evidence, compliance with all criteria/conditions enumerated in all applicable sections of the Zoning Ordinance. Credible evidence shall be given to demonstrate ability to gain compliance with other pertinent Ordinances that may apply to the particular project such as Subdivision and Land Development and Storm Water Management must also be given. Credible evidence may include, but is not limited to, site plans, engineering studies (i.e. traffic, hydrological, geophysical, etc.), photographs, written testimony and transcripts. The Township may require these and other forms of evidence at its discretion. At a minimum, written testimony enumerating compliance with all criteria and a site plan must be submitted with this application.

PART IV: AUTHORIZATION / SIGNATURES

The undersigned hereby represents that, to the best of his/her knowledge and belief, all information listed in this application and on any attached plans or forms is true, correct and complete. The undersigned also authorizes Conestoga Township to enter the property in question for a general site inspection. The undersigned agrees to accept and abide by the applicable Ordinances, Resolutions, Rules and Regulations now in effect for the Township.

Signature of Applicant

Date

Printed Name

Signature of Engineer/Consultant

Date

Printed Name

(For Township Use Only)

File No. _____

Date Application Received: _____ Application Accepted: Yes No*

Reason(s) for non-acceptance of application: _____

Expiration Date: _____ Extensions/Expiration: _____

Application Fee Paid: _____ Cash _____ Check (# _____)

Dates of Advertisement: _____ Date of Property Posting: _____

MEETING RECORD

Date of Planning Commission Meeting(s) : _____

Date of Supervisors Meeting(s): _____

Decision: APPROVED DENIED Date of Decision: _____

Copy of decision shall be attached to this form.

[10/2/17]

