

**NOTTINGHAM TOWNSHIP
WASHINGTON COUNTY**

CONDITIONAL USE APPLICATION

Address of Property _____

County Assessor's Tax Map Parcel Number _____

Acreage of Property _____

Present Use of Property _____

Zoning Classification of Property _____

Proposed Use of the Property _____

Name of Applicant _____

Address of Applicant _____

Telephone No. _____ E-mail Address _____

Name of Landowner _____
(If different than Applicant)

Address of Landowner _____

Telephone No. _____ E-mail Address _____

NOTE: If the applicant is not the landowner, an option agreement or other evidence of authorization to act on behalf of the landowner must be submitted with the conditional use application.

**THE PERSON WHO HAS AUTHORITY TO REPRESENT APPLICANT/OWNER WITH WHOM
PRIMARY CONTACT SHOULD BE MADE ON THIS PLAN:**

Name _____

Address _____

Telephone No. _____ E-mail Address _____

Has there been a previous application for a conditional use submitted for this property?

____ Yes ____ No.

If yes, give date when said previous conditional use was submitted and the results (granted or denied). _____

Does applicant consent to on-site observation by Township Officials and/or appointees?

____ Yes ____ No

Written Statement of Compliance with General Requirements and Standards for all conditional uses of Article IX, §425-23 of the Codified Ordinance No. 117: Enclosed ____ Yes ____ No

Has Applicant Reviewed Article XVI, §425-125 of the Codified Ordinance No. 117 for Conditional use procedure for approval? ____ Yes ____ No

Verification

I, _____, hereby depose and say that all above statements and the statements contained in the application papers submitted are true to the best of my knowledge and belief.

Signature of Applicant

Date

OFFICE USE ONLY

Date application received by Township: _____

Application Fee Paid? ____ Yes ____ No

Date Application Fee Paid _____ Check No. _____