Pequea Township
Conditional Use Application

Please Read the Following:
Please complete each part of this application and **pay the application fee of $1,250.00.** Section 1803 and Section 1808 of the Pequea Township Zoning Ordinance require that each application must be accompanied with a number of items, including a site plan with sufficient detail and accuracy to demonstrate compliance with all applicable provisions of the Ordinance. Please submit eight sets of plans. If you do not submit everything that the Ordinance requires, your hearing may not be scheduled or your application may be denied for failure to comply with these requirements.

Sign the application

Name of Applicant: _____

Address of Applicant:_____

Phone Number of Applicant:_____ Email: _____

Name and Signature of Owner: _____
(I authorize the applicant to make this application)

Address of Owner:_____

Address of property involved: _____

In what zoning district is the property located?:_____

Conditional Use Request:

Explain the purpose for which a conditional use is being sought: _____

_____

What section(s) of the Zoning Ordinance allow the conditional use that you are requesting?:

_____

Please read and agree to the following:

- ❑ I have read Section 1803 and Section 1808 of the Pequea Township Zoning Ordinance, and I know what I must do in order to submit a complete application.

- ❑ I have included eight sets of scaled drawings, drawn to scale, showing the actual dimensions and shape of the lot, and the size and location and dimensions of the proposed use, building or alteration.

- ❑ My application includes a written description of the proposed use.

I hereby apply for a conditional use. I agree to pay the filing fee and understand that I have no right to expect a hearing to be scheduled until I have paid the fee, and filed the necessary documentation as required by the Pequea Township Zoning Ordinance. I have read the forgoing and affirm that it is true and correct and to the best of my personal knowledge, or information and belied. I verify that all the statements made in the forgoing are true and correct and that false statements may subject me to the penalties of 18 Pa. C.S. Section 4904.

APPLICANT'S SIGNATURE:_____ _____

Date:

ADDENDUM to the APPLICATION

Please remember that you are responsible for paying one-half of the court reporter fee for each date of the hearing until a decision is reached and officially rendered.

Return to:

Mark A. Deimler, PE, Building Code Official/Zoning Officer
Solanco Engineering Associates, 103 Fite Way, Suite C, Quarryville, PA 17566
Phone: 717-786-0355 Fax: 717-806-5748