

### **HILLTOWN TOWNSHIP**

13 West Creamery Road P.O. Box 260 Hilltown, PA 18927 (215) 453-6000 Fax: (215) 453-1024 www.hilltown.org

# **CONDITIONAL USE APPLICATION**

Appeal is hereby made by the undersigned for Conditional Use from the terms of the Zoning Ordinance.

C.U. Appeal #: Date Rec'd:	
Fee:Escrow:	

	from the terms of	the Zohing Oramunee.	Listiow.
Appel	ant(Name)		
	(Name)	(Address)	
Phone:		Email:	
Owner	·		
	(Name)	(Address)	
Phone:		Email:	
Attorn	ey	(Address)	
if any)	(Name)	(Address)	
Phone:		Email:	
Interes	st of appellant if not own	er (agent, lessee, prospective pu	rchaser)
	or appendit if not own	or (month, respect, brookeen, o ba	(Other)
1. Apr	olication relates to (check	applicable item or items):	
- · · <del>·</del> PF	•	,	Haiaht
		Yards	Height
	Existing Building	Proposed Building	Other
) Brie	ef description of real esta	te affected:	
z. Dik	-		
	Location:		
	Lot Size:		
	Present Use:		
		cation:	
		ıpon land:	
	T		
3 Acti	on desired by annellant		
<i>5. 1</i> <b>10</b> 0	on desired by appendix.		

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Ordinance under which it is felt that desired	approve desired action (refer to section or sections of action may be allowed, and note whether hardship is
5. Has previous appeal been filed in connect	ion with these premises?(Yes or No)
6. Name and address of adjoining property of	owners:
I hereby depose and say that all the above so or plans submitted herewith are true to the b	tatements and the statements contained in any papers est of my knowledge and belief.
	day of
(Notary Public)	(Appellant)

### **NOTES:**

- a. Attach copies of plan of real estate affected, indicating location and size of lot, size of improvements now erected and proposed to be erected thereon, or other change desired, also any other information required by the Board of Supervisors. If more space is required, attach a separate sheet, and make specific reference to the question being answered.
- b. In question 4, include the grounds for the appeal or reasons both with respect to law and fact for granting the Conditional Use.
- c. Upon application for an appeal to the Board of Supervisors, the applicant shall pay a fee and an escrow (as determined by most current Fee Schedule Resolution) to Hilltown Township.
- d. Please submit <u>12 copies of all</u> application, and <u>all supporting documentation</u>, as well as a digital version of all paperwork. Two separate checks made payable to Hilltown Township for fees and escrow.