406 Old Ash Road, Mercer PA 16156 Phone: 724-748-4999 FAX: 748-4439 pmcquaid@springfield-mercer.org

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 conditionYesNo.	nal use submitted for this property?
If yes, give date when said previous conditional use denied).	· -
Does applicant consent to on-site observation by To	wnship Officials and/or appointees?
Written Statement of Compliance with Applicable St Ordinance: EnclosedYesNo	candards and Criteria of Township Zoning
Verification	
I,, hereby and the statements contained in the application pap knowledge and belief.	
Signature of Applicant	Date
TOWNSHIP OFFICE USE ONLY	
Date application received by Borough:	
Application Fee Paid?YesNo	
Date Application Fee Paid Check No	
Application #	