



North Wales Borough
 300 School Street
 North Wales, PA 19454
 Phone: 215-699-4424
 Fax: 215-699-3991
www.northwalesborough.org

Change of Use Permit Application

Permit Fee: \$80.00

Date Received: ____ / ____ / ____

Form of Payment: _____

Received by: _____

PROPERTY INFORMATION

Address:

Parcel No.:
14-00-

Block / Unit No.:

Zoning District:

PROPERTY OWNER /MANAGEMENT COMPANY

Name/Company:

Address (including City, State, Zip):

Phone:

Fax:

Cell:

Email:

LESSEE / TENANT

Name/Company:

Address (including City, State, Zip):

Phone:

Fax:

Cell:

Email:

USE INFORMATION

Current Use of Property:

Proposed Use of Property:

Date to Occupy:

Hours of Operation:

Square Footage of Use:

Square Footage of Building:

Number of Employees:

Number of Parking Spaces:

Description of Use: _____

PLEASE NOTE: ADDITIONAL INFORMATION RELATED TO THE USE MAYBE REQUIRED BY THE BOROUGH IN ORDER TO MAKE A DETERMINATION RELATING TO ZONING APPROVAL

APPLICANT'S SIGNATURE

Application is hereby made to North Wales Borough for approval to use and occupy the aforementioned location. I certify that all the information on this application is correct. I agree to comply with all the ordinances and codes of North Wales Borough and the Commonwealth of Pennsylvania. I understand that an application for a change of use and payment of the permit fee does not constitute issuance of a permit.

Applicant's Signature: _____ **Date:** _____