



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

CONDITIONAL USE APPLICATION

Applicant Information

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
Interest of Applicant, if not owner (agent, lessee, etc.): _____

Owner Information

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

Attorney for Applicant Information

Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____

1. Brief Description of Real Estate Affected:

Parcel #(s): _____ Block No. _____
Address: _____
Lot Size: _____ Deed Recorded at Norristown in Deed Book No.: _____ Page No.: _____
Present Zoning Classification: _____ Present Use: _____
Present Improvements on Land: _____

2. Specific Section(s) of the Zoning Code upon which this Application is based:

3. Describe the Proposed Use of Property:

4. Briefly State Why the Applicant Believes the Borough Council Should Grant the Application:

NOTE: The applicant or its representative(s) shall be required to provide testimony at the Planning Commission meeting(s) at which this application is discussed and at the required Borough Council Public Hearing(s) for this application, addressing the considerations of the Borough Council.

5. Answer the Following Questions and Provide a Date of Previous Application (if known):

Has a previous Conditional Use Application been filed for this Property? ☐ Yes ☐ No _____

Has a previous Zoning Hearing Board Application been filed for this Property? ☐ Yes ☐ No _____

Has a previous Subdivision or Land Development Application been filed for this Property? ☐ Yes ☐ No _____

Other Requirements:

1. Copy of the property deed.
2. (20) copies of the plans and other materials. If the application shall involve a subdivision or land development, then plans prepared in accordance with the requirements of the Subdivision and Land Development Ordinance shall be filed for review as well. **Please Note: The plans will need to be sealed by a licensed surveyor or engineer unless the Zoning Officer grants a waiver.**

Other Considerations:

1. Letters of support from nearby property owners or those affected by appeal.
2. Photos, renderings and other visuals for illustrative purposes.

My signature authorizes permission to post this property and permission to Borough officials and staff to enter thereon for inspection purposes. My signature further authorizes a waiver of the 60-day requirement to hold the first hearing (from date of application) as stipulated in the PA Municipalities Planning Code, recognizing that the Borough will make every effort to abide by said requirement but if circumstances do not permit, to hold the first hearing as soon as reasonable feasible.

I certify that the information provided on this application and supporting documentation and plans are true and correct to the best of my knowledge, information and belief.

DEPARTMENT USE ONLY

C.U. Application #: _____

Date Received: _____

Fee Paid: \$ _____ Date Paid: ____ / ____ / ____

APPLICANT NAME: _____

APPLICANT SIGNATURE: _____

OWNER NAME: _____

OWNER SIGNATURE: _____