

CHADDS FORD TOWNSHIP
Delaware County, PA
CONDITIONAL USE APPLICATION

We the undersigned, hereby make application for Conditional Use under the terms of the Chadds Ford Township Zoning Ordinance, as amended, and provide the following information related to our application:

PROPERTY TAX FOLIO: # 04 - _____

PROPERTY STREET ADDRESS: _____

ZONING DISTRICT: _____

Applicant:

Name _____

Firm _____

Address _____

Tel: _____ Fax: _____

email: _____

Owner (if different from applicant):

Name _____

Firm _____

Address _____

Tel: _____ Fax: _____

email: _____

BASIS OF APPLICANT'S STANDING: _____

(e.g. record owner, equitable owner or lessee)

Attorney (for applicant):

Name: _____

Firm: _____

Address _____

Tel: _____ Fax: _____

email: _____

Engineer (for applicant):

Name: _____

Firm: _____

Address: _____

Tel: _____ Fax: _____

Email: _____

Architect (for applicant):

Name: _____

Firm: _____

Address: _____

Tel: _____ Fax: _____

Email: _____

PROPERTY DESCRIPTION:

Present Use of Property: _____

Detailed Description of Proposed Use: _____

Zoning Ordinance Section/Subsection(s) Permitting Conditional Use in this Zoning District: _____

Statement of Facts and/or Basis in Support of Conditional Use Application _____

Size of Subject Property:

Square Feet _____ Dimensions _____

Dimensions of Proposed Construction:

Square Footage by Floor:

Height _____

Width _____

Depth _____

Percentage of Building Coverage

Before Construction _____ *After Construction* _____

Percentage of Impervious Coverage

Before Construction _____ *After Construction* _____

Front/Rear/Side Yards

Before Construction _____ *After Construction* _____

Front _____

Rear _____

Side _____

Names and Addresses of all Abutting Property Owners and Owners of Property within 250 feet of the Property in Question:

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

If additional properties, continue on separate sheet and check here _____

APPLICATION CHECKLIST

- _____ **14 copies** of all required documents referenced below or referenced in applicable Chadds Ford Township Code Section(s) listed below including any cover letter(s) or additional documentation provided with Application unless otherwise noted below. Refer to Township Code Section 135-164 “Conditional Use Standards, Criteria and Procedures” found in Article XXI, “Additional Regulations” for pertinent details regarding a conditional use application.

- _____ 1 Electronic copy of all Application materials as .PDF document(s).

- _____ Copy of Deed and/or Legal Description if different than Deed and/or Agreement of Sale or Lease.

- _____ Application fee per current Township Fee Schedule. Make check payable to “Chadds Ford Township.”

- _____ Escrow fee per current Township Fee Schedule. Make check payable to “Chadds Ford Township.”

- _____ Reimbursement Agreement (one copy only).

- _____ Engineered plans and surveys in conformance with Article IV, “Plan Requirements,” Code Section 110-17 – 110-23.

- _____ If Conditional Use is required for steep slopes, then inclusion of all materials per Township Code Section 135-144.8 “Administration” of Article XVIIIA, Steep Slopes.

- _____ If required by the Township, submission of a Subdivision Application and Land Development Plan per all requirements found in Code Section 110, “Subdivision and Land Development” and in conformance with Article IV, “Plan Requirements,” Code Sections 110-17 – 110-23. A separate application fee and escrow must be provided.

- _____ An appointment is required to drop off your application. Call 610.388.8800 or email info@chaddsfordpa.gov to schedule your appointment.

COMMONWEALTH OF PENNSYLVANIA :

: ss

COUNTY OF DELAWARE :

AFFIDAVIT

_____, being duly sworn according to law, deposes and says that he/she is the Applicant herein (or that he/she is one of the Applicants herein and is authorized to make this Affidavit on behalf of all the Applicants), (or that he/she is an officer, employee or agent of such Corporate Applicant herein and as such officer; employee or agent of such Corporate Applicant, he/she is authorized to make this Affidavit on its behalf and as its Agent), and that the facts set forth herein are true and correct to the best of his/her knowledge, information and belief.

Signature of Applicant or Agent

Sworn and subscribed before me this _____ day of _____, 20____

Notary Public (SEAL)