

TOWNSHIP USE ONLY

CASE NUMBER: \_\_\_\_\_

DATE FEE RECEIVED & FILED: \_\_\_\_\_

**BOARD OF SUPERVISORS  
STRASBURG TOWNSHIP  
LANCASTER COUNTY, PENNSYLVANIA**

**APPLICATION FOR CONDITIONAL USE**

Definition of Conditional Use per Section 112 of the Strasburg Township Zoning Ordinance: “A use which may be appropriate to a particular zoning district, only when specific conditions and criteria prescribed for such uses have been complied with. Conditional uses are reviewed by the Board of Supervisors after recommendations by the Planning Commission, in accordance with Section 704 of this Ordinance”.

*Use black or blue ink*

OWNER, APPLICANT AND PROPERTY IDENTIFICATION

1. Name of Property Owner:
2. Address of Property Owner:
3. Telephone Number(s) and Email Address(es) of Property Owner:

COMPLETE #4 - #7 ONLY IF APPLICANT IS DIFFERENT FROM PROPERTY OWNER

4. Name of Applicant:
5. Interest of Applicant in subject property:
6. Address of Applicant:
7. Telephone Number(s) and Email Address(es) of Applicant:
8. Address of Subject Property:
9. Zoning District of Subject Property:

10. Tax Account Number (formerly tax map number):

PRESENT AND PROPOSED PROPERTY USE

11. Fully describe the present use of the property that is the subject of this application (attach additional sheets if more space is required):

12. Fully describe the proposed use of the property that is the subject of this application (attach additional sheets if more space is required):

13. Identify the proposed conditional use. Include the applicable Section or Sections of the Zoning Ordinance, and describe how the proposed use will meet all of the criteria for the use set forth in the applicable section or sections of the Zoning Ordinance (attach additional sheets if more space is required):

14. Has this property been the subject of prior consideration, discussion, and/or application for conditional use, special exception, or zoning variance? If so, describe in detail with date(s) and approvals, if any (attach additional sheets if more space is required):

**FILING REQUIREMENTS**

1. **Three (3) copies of a Site Plan** prepared in accordance with Sections 701.2, 701.3, and 704.4 of the Strasburg Township Zoning Ordinance, as applicable. **THIS SITE PLAN MUST CLEARLY IDENTIFY THE FILING REQUIREMENTS WHICH INCLUDE, BUT ARE NOT LIMITED TO, THE PROPERTY LINES OF THE SUBJECT PROPERTY, LOCATION AND DIMENSIONS OF EXISTING AND PLANNED STRUCTURES, LOCATION AND DIMENSIONS OF EXISTING AND PLANNED DRIVEWAYS, PARKING REQUIREMENTS WITH LOCATION AND DIMENSIONS OF PARKING AREAS, LOCATION OF EXISTING AND PLANNED WELLS AND ON-LOT SEPTIC SYSTEMS, INTERIOR AND EXTERIOR STORAGE AREAS, AND ALL SIGNIFICANT FEATURES SUCH AS FLOOD PLAINS, WETLANDS, STEEP SLOPES, EASEMENTS, AND DRAINAGE WAYS.**
  
2. **Original with seven (7) copies of the completed ‘Application for Conditional Use’ and supporting documents to Strasburg Township, 400 Bunker Hill Road, Strasburg, PA 17579. Or one (1) original and electronic copies of the completed application and supporting documents emailed to secretary@strasburgtownship.com.**
  
3. **Include a list of the names and addresses of all adjoining property owners, including those directly across the road from property involved in the hearing.**

**FEE**

**Fee of \$750.00 is required at time of filing.**

In making this application, the Applicant agrees to pay all fees required by the fee schedule adopted by Board of Supervisors by ordinance or resolution in effect on the date of the application.

**ACKNOWLEDGMENT AND VERIFICATION**

***By signing this Application, I, the Applicant, do hereby acknowledge that it is my responsibility to demonstrate to the Board of Supervisors that this Application meets all specific and objective requirements of the Zoning Ordinance for the conditional use I desire.***

***Also, by signing this Application, I, the Applicant, do hereby verify that I have reviewed and understand the statements made in this Application and that all such statements are true and correct to the best of my knowledge, information and belief. These statements are being given by me to induce official action on the part of the Board of Supervisors of Strasburg Township and I understand that any false statements made herein are being made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.***

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant; show capacity if applicant is a partnership or a corporation)

(If the application is being made by a person other than the property owner, attach a written and signed authorization from the property owner consenting to the application and designating you as his agent.)

List names and addresses of adjoining property owners including those directly across the street involved in the hearing.

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

3. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

4. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

5. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

6. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

7. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

8. Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_