



Upper Salford Township

Box 100 • Salfordville, PA 18958-0100
(610) 287-6160 • FAX (610) 287-9435

CONDITIONAL USE APPLICATION

NAME: _____ DATE: _____
ADDRESS: _____

PROPERTY LOCATION _____
(If different from above) _____

ZONING CLASSIFICATION: _____ TOTAL LOT AREA: _____

EXISTING USE AND IMPROVEMENTS: _____

PROPOSED IMPROVEMENT: _____

APPLICANT SEEKS THE GRANT OF A CONDITIONAL USE PERMIT ON THE FOLLOWING BASIS: _____

(FOR APPLICATIONS FOR CONDITIONAL USE PERMIT UNDER SECTIONS 301 AND 401 OF THE UPPER SALFORD ZONING ORDINANCE, APPLICANT REPRESENTS THAT (1) THE STRUCTURE WILL BE USED IN CONNECTION WITH A PERMITTED AGRICULTURAL ACCESSORY USE TO THE DWELLING AS PERMITTED BY SECTION 1605 (B) (1); (2) THE STRUCTURE SHALL NOT BE USED IN CONNECTION WITH ANY HOME OCCUPATIONAL USE OTHER THAN IN CONNECTION WITH A PERMITTED AGRICULTURAL ACCESSORY USE; AND (3) THAT THE APPLICANT SHALL BE REQUIRED TO APPLY FOR AND OBTAIN A BUILDING PERMIT FOR THE CONSTRUCTION OF THE PROPOSED STRUCTURE PRIOR TO COMMENCING ANY CONSTRUCTION.)

NOTE: CONDITIONS MAY BE IMPOSED UPON THE GRANT OF ANY CONDITIONAL USE GRANTED BY THE BOARD OF SUPERVISORS. STRICT COMPLIANCE WITH THOSE CONDITIONS WILL BE ENFORCED.

Application Fee: \$500.00 Paid _____ Date _____

***If there is a need for more than one hearing, the applicant is responsible for an additional \$250.00, plus reimbursement to the township for each additional advertisement and use of a court stenographer.**

Signature of Owner