

Date: \_\_\_\_\_  
Application No.: \_\_\_\_\_

# **TINICUM TOWNSHIP**

## **SPECIAL USE HEARING APPLICATION**

**COMPLETE WITH ALL INFORMATION AND DETAILS.**

Applicant: \_\_\_\_\_  
(If more than one applicant, list additional name(s) on the back of this form.)

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

Location of  
Property: \_\_\_\_\_

Deed Book: \_\_\_\_\_ Page No.: \_\_\_\_\_

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

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

**State interest of each petitioner in property whether owner or purchaser under agreement of sales, etc.**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**State present zoning of property:** \_\_\_\_\_

\_\_\_\_\_

**Application is made for a Conditional Use Hearing before the Board of Commissioners as required under the following section of the Tinicum Township Zoning Ordinance:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

State facts and/or basis of support of application as to why applicant(s) is/are entitled to such:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PROVIDE ANY CORRESPONDENCE, EXHIBITS, MAPS, PLANS, ETC. YOU PLAN TO PRESENT AT THE REQUESTED HEARING

NOTE: THIS APPLICATION MUST BE SWORN TO. THE AFFIDAVIT LISTED BELOW MUST BE EXECUTED BEFORE A NOTARY PUBLIC.

The undersigned request(s) the Tinicum Township Board of Commissioners hold a Conditional Use Hearing on this matter and submit(s) the required Application Fee of \$1000.00 for a Commercial Application.

**\*\*\*\* If fees should exceed the amount paid there will be additional fees to pay.**

All owners and petitioners to sign

: \_\_\_\_\_  
:  
:  
:  
: \_\_\_\_\_

Telephone No.:

: \_\_\_\_\_

COUNTY OF DELAWARE

: SS

COMMONWEALTH OF PENNSYLVANIA :

The undersigned, being duly sworn according to law, depose and say that they are the Petitioners named in the foregoing application and that the facts set forth in said application are true and correct to the best of his knowledge, information and belief.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Sworn to and subscribed  
before me this      day  
of              A.D. 20

\_\_\_\_\_  
NOTARY PUBLIC