S SURVISION S	TOWNSHIP OF LEHIGH COUN 2900 South Pike Avenue, A 610-797-40	NTY, PA llentown, PA 18103
	CONDITIONAL US	SE APPEAL
Date Received:	Application No:	Fee Paid:
PROPERTY INFORM		
	AHON.	
Zoning District:		Гах Parcel Number:
-		
USE OF PROPERTY:		
Present Use:		
Proposed Use:		
APPLICANT:		
		Phone No:
		Zip Code:
Email Address:		i

PROPERTY OWNER INFORMATION (If different from applicant):

NOTE: If applicant does not own the property, owner must sign this appeal application or applicant must otherwise prove standing to proceed with the appeal.

Name:	Phone No:		
Owner Street Address:			
City:	State:	Zip Code:	
Email Address:			

ATTORNEY:

□ Applicant wishes all communicat	ions to include attorney		
Firm Name:			
	Phone No:		
Firm Street Address:			
City:	State:	Zip Code:	
Email Address:			

ARCHITECT, ENGINEER, OR SURVEYOR:

□ Applicant wishes all communications to include architect, engineer, or surveyor

Company Name:		
Contact:	Phone No:	
Company Street Address:		
City:	State:	Zip Code:
E-Mail Address:		

SUBMISSION REQUIREMENTS (Additional materials may be requested by the Township during the review and approval process):

- Application fee: \$1,000
- Escrow deposit: \$1,000 (Required for all proposed uses involving new structures or the expansion of an existing structure.)
- 4 printed copies and 1 PDF/electronic copy of completed appeal application
- 4 printed copies and 1 Microsoft Word file or Microsoft Excel file list of all property owners within 300 feet, in all directions, of the subject property lot lines including the property owners' mailing addresses
- 4 printed copies and 1 PDF/electronic copy of all supporting documents and exhibits for the hearing (may be submitted up to 24 hours prior to hearing)
- 4 printed and 1 PDF/electronic copy of all exhibits to be presented at meeting (may be submitted up to 24 hours prior to meeting)

ESCROW DEPOSIT SHALL BE RETURNED TO (If not completed, check will be returned to applicant):

Not Applicable			
Name:		Phone No:	
Street Address:			
City:	State:	Zip Code:	

PERMISSION FOR AERIAL & GROUND VIEW OF PROPERTY:

Applicant(s) and/or owner(s) hereby grant(s) permission and authorize members of the Township of Salisbury staff, Planning Commission members, and/or Commissioners individually to visit the site and review aerial and ground depictions of the subject property and its surrounding neighborhood as part of the submission with the Conditional Use Appeal.

Applicant Signature:	Date:
Owner Signature:	Date:

ACKNOWLEDGEMENT/CERTIFICATION:

If the proposed use involves a new structure, or the expansion of an existing structure, applicant is required to submit an escrow deposit of \$1,000 with this appeal. Additionally, applicant agrees to reimburse the Township for all engineering, legal, or other outside agency expenses incurred by the Township, plus a 3% administrative fee for residential projects and a 5% administrative fee for commercial/non-residential projects. At the applicant's request, upon the issuance of a zoning permit and the payment of all expenses, the balance of the escrow will be returned. The escrow will not be returned until all invoices from the Township Solicitor, Township Engineer, and any other outside agency have been received by the Township and paid by the applicant. Invoices are typically submitted at the end of every month. If invoices are not paid within 90 days, the project will be placed on hold and no further activity may take place until the applicant's account is brought to the present or a payment plan has been established with the Township Finance Department.

Applicant(s) and/or owner(s) hereby certify that all stated information within this appeal is correct and complete; Salisbury Township is not responsible for errors or omissions. Public notice of meeting will be based solely on this application.

Applicant Signature:		Date:
Owner Signature:		Date:
Office Use Only		
Township Engineer Review Required:	\Box Yes \Box No	Date Submitted for Review:
Township Solicitor Review Required:	\Box Yes \Box No	Date Submitted for Review:
Use: □ Commercial / Nonresidential	🗆 Residentia	1
Escrow Required: \Box Yes \Box No	Escrow Amount:	Date Deposited: