



Upper Moreland Township
117 Park Avenue
Willow Grove, PA 19090
215-659-3100
215-659-8899 (fax)
www.uppermoreland.org

Conditional Use Application

PROPERTY OWNER:

(List legal owner, equitable owner and/or lessee of property)

Name

Owner's Address

Owner's Telephone Number

NAME OF APPLICANT:

MAILING ADDRESS:

TELEPHONE NO.:

PREMISES DETAILS:

Address of Premises

Tax Parcel Block and Unit Identification

Size of Property and Building Dimensions

**APPLICANT'S
ATTORNEY
INFORMATION:**

Name

Firm

Address

Telephone Number

ZONING DISTRICT:

Conditional Use Application

REQUEST: 1. Applicant shall state sections which provide authorization for a conditional use pursuant to the Zoning Code.

2. Applicant shall state specific proposal:

a. **Type of use:** _____

b. **Size of use:** _____

c. **Size and dimensions of lot area to be occupied or utilized by the conditional use:** _____

d. **Anticipated hours of operation:** _____

e. **Number of employees:** _____

f. **If residential, number and type of dwelling use:** _____

g. **Commercial or industrial vehicles associated with the use:** _____

3. **Specific conditions or restrictions offered by the applicant to be considered by the Board of Commissioners:**

Conditional Use Application

- 4. Has a previous conditional use application been filed on this property?**
 - a. If Yes, give date and disposition of previous application:**

- 5. Has a previous application been filed in connection with this property?**
 - a. If Yes, give date and disposition of previous application:**

Applicant shall comply with conditional use procedures as set forth in the Upper Moreland Township Zoning Code.

Submit three copies of plans, 24"x 36" (11"x17" at Director's discretion), which shall show existing conditions and nature of proposed use.

APPLICANT

DATE

OWNER

DATE

Received by UMT staff member:

NAME

DATE