

**DENNISON TOWNSHIP
APPLICATION FOR A CONDITIONAL USE**

1. NAME AND ADDRESS OF APPLICANT:

2. NAME AND ADDRESS OF OWNER OF RECORD, IF THE APPLICANT IS NOT THE OWNER OF THE SUBJECT PROPERTY:

3. LOCATION OF PROPERTY AND ZONING DISTRICT IN WHICH THE SUBJECT PROPERTY IS LOCATED:

4. PRESENT USE OF LAND AND/OR STRUCTURE(S):

5. TYPE OF CONDITIONAL USE AND COMPLETE DESCRIPTION AND NARRATIVE OF PROPOSED USE OF LAND AND/OR STRUCTURE: USE ADDITIONAL SHEETS IF NECESSARY:

6. DRAWINGS AND ALL SUPPORTING MATERIAL AS REQUIRED UNDER ARTICLE 7 OF THE ZONING ORDINANCE ATTACHED ?

YES NO

- 7. A COPY OF INITIAL APPLICATION FOR A ZONING PERMIT AND DECISION FROM ZONING OFFICER MUST ACCOMPANY THIS APPLICATION.

- 8. DATE OF MEETING FOR PLANNING COMMISSION REVIEW OF APPLICATION: (Leave Blank - Date will be provided by the Township)

I ATTEST TO THE FACT THAT THE ABOVE INFORMATION AND ALL SUPPORTING MATERIAL AND/OR DATA RELATED TO THE SUBMISSION OF THIS APPLICATION IS TRUE AND CORRECT.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF OWNER

DATE

FOR TOWNSHIP USE ONLY

- A. Zoning Permit Application Number: _____
- B. Date of Written Request for Hearing: _____
- C. Publication Dates of Public Notice: _____
- D. Date of Public Hearing: _____
- E. Recommendation of Planning Commission: _____
- F. Decision of the Board of Supervisors: _____
- F. Date Decision Rendered: _____
- G. Date of Notification of Decision: _____
(To Applicant)