



NORTH WHITEHALL TOWNSHIP ZONING

3256 Levans Road ❖ 610-799-3411
Coplay, PA 18037 ❖ 610-799-9629 FAX

CONDITIONAL USE APPLICATION

Applicant's Name

Street Address

City, State & Zip Code

Telephone Number

Conditional Use Number
Advertised Dates
Application Fee
Date Received (For Official Use Only)

The following is a list of questions designed to assist you and the North Whitehall Township Board of Supervisors in the efficient and speedy review of your Conditional Use Application. Please thoroughly answer all questions which are applicable to your project. If you believe the question does not pertain to your project, please indicate on this form by answering **"Not applicable"**. **All Questions must be answered to consider this Conditional Use Application fully complete.**

A complete site plan must be attached to this application. **Please refer to Submission Requirements for Complete Site Plans.** Return this form to the Zoning Officer when you file your application. Please type or print clearly.

Please complete the following questions:

1. What is the applicant's interest in the premises affected? (i.e. owner, equitable owner, tenant)

2. If applicant is represented by an attorney or counsel, please list their full name, address, telephone, fax number and email address.

3. If the property owner is not the applicant, list the full name, address and phone number of the owner.

4. Please provide the requested information about the Property involved in this Conditional Use Application as described below:

Location: _____
(Street Address)

Tax Map ID: _____ Lot Size: _____

Present Uses: _____ Zoning District: _____

Date of when Present Use Began: _____

Date of acquisition of this Property by the Owner: _____

Please list each structure and its use currently located on this property:

5. What type of sewage and water facilities are available on the property? If no facilities are present, please refer to Question 16.

6. Are there any outstanding State or Federal violations cited on this property at the time of this application? _____ If yes, please explain these violations below:

7. Has any previous appeal been filed in connection with this property? _____ If yes, please list Applicant's Name, Date, and Nature of Appeal. _____

8. Does the Applicant intend to file any type of Zoning Appeal for this project? _____ If yes, please check the type of Zoning Appeal sought:

- a) Variance Appeal _____
- b) Special Exception Appeal _____
- c) Interpretation of Zoning Ordinance _____
- d) Enforcement Notice Appeal _____
- e) Other Appeal _____

9. State in, narrative form, the nature of your Conditional Use including the primary relevant facts intended to be presented to the North Whitehall Township Board of Supervisors. Please include a description of all explosive or toxic materials to be stored on this site. Please reference your attachment if additional space is needed.

10. What is the exact use proposed for the property? List hours of operation, number and type of employees, business equipment to be used or stored at the site, and nature of normal business operations. Please reference your attachment if additional space is needed.

11. Are additional State, Federal or other permits required to operate the proposed use of structure? _____ If yes, please provide the list of permits and their status required to operate the proposed use of structure.

12. Describe the landscaping proposed for this project. Please indicate the type of landscape buffering proposed, if any.

13. What is the character of the buildings and uses on abutting properties and what is the general character of the surrounding neighborhood? Please reference your attachment if additional space is needed.

14. What will the impact of this use be on existing traffic patterns and volumes and has a traffic study been done which complies with the North Whitehall Township Ordinance for this Conditional Use? Also, please specify the amount of parking spaces and unloading areas as specified in the 1995 North Whitehall Township Zoning Ordinance.

15. What will the impact of this use be on existing stormwater infrastructure? Has a stormwater engineering study been done that complies with Act 167 and has this plan been submitted to Lehigh Valley Planning Commission for their review?

16. What will the impact of this use be on existing sewage or potable water infrastructure? Does this project comply with Act 537 and has the applicant secured DEP Sewage Facilities Planning Module approval? Will this project need municipal water or will individual wells be supplied to each dwelling unit or building? If a private water and sewer system is proposed, please indicate this within this section. An engineering study and plan should be done prior to submission of this Conditional Use for sewer and water supplied in order to provide the information needed for the Board of Supervisors to determine Conditional Use Approval. Please reference your attachment if additional space is needed.

17. What degree will the proposed Conditional Use emit smoke, dust, odor or other air pollutants, noise, vibration, light, electrical disturbances, water pollutants, or chemical pollutants? Such evidence may include the proposed use of proven special structural or technological innovations. Also, provide specific and detailed information on all of the aforementioned topics. Please reference your attachment if additional space is needed.

18. Will the Conditional Use requested, if authorized, alter the essential character of the neighborhood or district in which the property is located, or substantially or permanently impair the appropriate use of development of adjacent property, or be detrimental to the public welfare? Please give reasons for your answers to the aforementioned questions by explaining below. Please reference your attachment if additional space is needed.

19. (I) (WE) believe that the Board should approve this request because?
Include the grounds for the Conditional Use or reasons both with respect to law and fact for granting the Conditional Use requested. Please reference your attachment if additional space is needed.

20. If you have any additional **Comments**, other **Relevant Information** or need additional space for answering questions, note answers below. **Please indicate if additional attachments are with this appeal application.**

I hereby certify that all of the above statements contained in this application and any papers or plans submitted on behalf of this Conditional Use to the North Whitehall Township Board of Supervisors herewith are true to the best of my knowledge and belief.

Date: _____

(Signature of Applicant & print applicant name)