LONDON GROVE TOWNSHIP
CONDITIONAL USE APPLICATION
372 Rose Hill Road • West Grove, PA 19390
Phone: (610) 345-0100 • Fax: (610) 345-0455
www.londongrove.org

Date Received: _____
60-Day Date: _____
Hearing Date: _____
Fee Paid: _____

SUBMISSION REQUIREMENTS

- **12 complete sets** of application form, narrative, and site plan (One electronic copy of the site plan)
- **Two sets** of required reports
- **Payment of fee:** $2,500 *As per Resolution No. 587, "Should the cost to the Township for processing an application, including but not limited to the cost of engineering and legal reviews, exceed the fees specified herein, the Applicant is required to pay the additional costs."*
- Additional information required by the Board of Supervisors and the reviewing agencies.

APPLICANT INFORMATION:

Exact Name & Postal Address:
_____
_____
_____
_____

Phone: _____
Fax: _____
E-mail: _____ __

OWNER INFORMATION, IF DIFFERENT:

Exact Name & Postal Address:
_____
_____
_____
_____

Phone: _____
Fax: _____
Email: _____

PROPERTY INFORMATION:

Tax Parcel Number(s) _____ Acres _____

Street Address: _____

Zoning District: _____

Location: _____

No. of Lots:_____ Square Feet of Non-Residential Space:_____

Current Use/Improvements: _____

Proposed Use/Improvements: _____

List all conditional use(s) proposed by specific articles and sections of the London Grove Township Zoning Ordinance, as amended: _____
_____

I, the undersigned, attest to the truth and correctness of all facts and information presented with this application and agree to pay for all fees associated therewith and required by this application upon submittal of the application to the Township.

APPLICANT SIGNATURE: _____ **DATE**:_____

FOR OFFICE USE ONLY

	Date Application forward to:
Engineer/Consultants:	
Board of Supervisors:	
Township Planning Commission:	
County Planning Commission:	
Solicitor:	
Other:	

Notice of Hearing Published: _____

Date Decision Rendered: _____

Date Decision mailed to Applicant: _____