

CHERRY RIDGE TOWNSHIP

% Jerry McDonald
269 Spinler Rd.
Honesdale, PA. 18431
(570) 253-8464

CONDITIONAL USE APPLICATION

OWNER/APPLICANT:

Name: _____

Address: _____

Telephone No.: —

Contact Name: _____

ENGINEER/SURVEYOR/ARCHITECT:

Name: _____

Address: _____

Telephone No.: _____

Contact Name: _____

DEVELOPER:

Name:- _____

Address: _____

Telephone No.: _____

Contact Name: _____

ATTORNEY:

Name: _____

Firm: _____

Address: _____

Telephone No. : _____

TAX MAP NO.: _____

CONTROL NO.: _____

___ LOCATION/DESCRIPTION OF THE PROPERTY:

I, THE OWNER/APPLICANT, HEREBY CERTIFY THAT THE PARTIES SET FORTH ABOVE ARE MY AGENTS, AND ARE DULY AUTHORIZED TO ACT ON MY BEHALF IN ANY CAPACITY RELATIVE TO THIS SUBMISSION.

I FURTHER REPRESENT THAT THE INFORMATION PROVIDED IN THIS APPLICATION, AND ALL SUPPORTING DOCUMENTATION SUBMITTED HERewith, IS TRUE AND CORRECT, AND REQUEST THAT A CONDITIONAL USE PERMIT BE ISSUED IN RELIANCE THEREON.

DATE: _____

OWNER/ APPLICANT

Print Name: _____

GENERAL PROJECT INFORMATION

1. Description of the Project/ Proposed Use:

2. Total number of lots/acreage of parcel(s):

3. Projected total earth disturbance for this Project:

4. Does this Project involve an existing use/ structure? If yes, please describe:

5. Type of Water/Sewage **Systems**: _____

6. Does this Project involve two (2) or more uses/structures per parcel? If yes, please describe:

7. Does this Project involve a change in or expansion of a Non-Conforming Use/Lot/Structure? If yes, please describe:

8. Does this Project include any Accessory Uses/Structures? If yes, please describe:

9. Will the Project require Subdivision or Land Development Approval? Please mark the appropriate line(s) below:

- _____ Subdivision Approval
- _____ Major Subdivision
- _____ Minor Subdivision
- _____ Land Development Approval
- _____ Not Applicable

If yes, what is the status of your Subdivision/Land Development Application?

10. Will you be seeking a Variance in connection with this Project? If yes, please describe:

11. Please mark all of the following that apply to this Project:

- | | |
|---------------------------------------|---------------------------------|
| ___ Off-Street Parking/ Loading Areas | ___ Noise/Vibration |
| ___ Signs | ___ Smoke/Odors/Emissions |
| ___ Lighting | ___ Fire/Explosion Hazards |
| ___ Landscaping/Buffers/Screening | ___ Waste Storage/Disposal |
| ___ Increased Water/Sewage Usage | ___ Surface/Groundwater Impact |
| ___ Increased Traffic Flow/Congestion | ___ Other Environmental Impacts |

12. Does the Project involve any of the following (or similar) uses?

- _____ Retail Business
Specify type: _____
- _____ Office
Specify type: _____
- _____ Service Establishment
Specify type: _____
- _____ Wholesale Business
Specify type: _____
- _____ Manufacturing/Industry
Specify type: - _____

- | | |
|--|--|
| <input type="checkbox"/> Restaurant | <input type="checkbox"/> Model Home |
| <input type="checkbox"/> Resort Facility/Country Club | <input type="checkbox"/> Cluster Residential Development |
| <input type="checkbox"/> Golf Course | <input type="checkbox"/> Multi-Family Dwelling |
| <input type="checkbox"/> Private Club/Lodge | <input type="checkbox"/> Mobile Home Park/ Mobile Home |
| <input type="checkbox"/> Hotel, Motel or Lodging Facility | <input type="checkbox"/> Shopping Center/Mall |
| <input type="checkbox"/> Hospital/Health Facility | <input type="checkbox"/> Warehouse/Mini-Warehouse |
| <input type="checkbox"/> Child Care Facility | <input type="checkbox"/> Industrial Park |
| <input type="checkbox"/> Group Care Facility | <input type="checkbox"/> Solid Waste Disposal |
| <input type="checkbox"/> Rehabilitation Facility | <input type="checkbox"/> Recycling Facility |
| <input type="checkbox"/> Prison/Detention Center | <input type="checkbox"/> Junkyard |
| <input type="checkbox"/> Funeral Home | <input type="checkbox"/> Adult Business |
| <input type="checkbox"/> Vehicle Related Use (e.g., Sales, Service, Gas Station, Car Wash) | <input type="checkbox"/> Communication/Reception Antenna Theater |
| <input type="checkbox"/> Animal Hospital | <input type="checkbox"/> Natural Resource Use/Processing |
| <input type="checkbox"/> Stable or Kennel | <input type="checkbox"/> Agricultural Products Processing |
| <input type="checkbox"/> Temporary Use | <input type="checkbox"/> Campground/RV Park |
| <input type="checkbox"/> Home Business/Occupation | <input type="checkbox"/> Outdoor Shooting/ Archery Range |
| <input type="checkbox"/> Special Lot Provisions (Two or More Uses/Structures per Lot) | <input type="checkbox"/> Tourist/Recreation/Public Facility Amusement Park |
| <input type="checkbox"/> Other-Please specify: _____ | |

CONDITIONAL USE SUBMISSION CHECKLIST

- (1) Ten (10) copies of this Application, including a Narrative providing all Project Details, together with evidence of your compliance with the express standards and Criteria set forth in the Zoning Ordinance. (See Sections 108-57 Of-the Ordinance, generally, and all other sections applicable to your particular Project.)
- (2) Ten (10) paper copies and one (1) pdf copy on disk of the Plot Plan in accordance with Section 1206 of the Zoning Ordinance, generally, and all other provisions applicable to your particular Project. **(NOTE:** The construction of a commercial structure is considered a Land Development, and is also subject to the requirements of the Cherry Ridge Township Subdivision and Land Development Ordinance.)
- (3) Ten (10) copies of any Permits/Approvals (e.g., DEP, PENNDOT, Wayne County Conservation District, PA Department of Labor & Industry, etc.).
- (4) Ten (10) copies-Other Documents (as applicable to your particular Project) (e.g., Sewage Planning Module, Stormwater, Drainage & Management/Soil Erosion and Sedimentation Control Plan, Environmental Impact Statement, etc.).
- (5) Filing Fee.