INSTRUCTIONS

1. Complete the application. Please print legibly or type the information.
2. Sign and Date the application.
3. You must address the use and consideration to its location as it relates to adjacent, established or intended uses, or to the planned growth of the community.
4. A complete application, with plans, applicable reports, drawings, and any additional information relevant to the request must be submitted to the City’s Zoning Officer.
5. The application and seven (7) sets of all additional materials submitted with the application must be originals. The City will not accept fax copies of any materials associated with the application.
6. The fee is currently $400.00. Fees are subject to change at any time, and are determined by the City Council of the City of Pittston. This fee must be paid in full at the time of application submission or the application will not be accepted. Checks are to be made payable to the City of Pittston.
7. There may be additional review or transcription fees that incur during the application process as set by Resolution and approved by the City Council of the City of Pittston.
8. If the application submitted is not complete, the City reserves the right to immediately deny the application and return it to the Application without the Planning Commission’s and City Council’s review and action on the application.
9. I/We have read and understand the directions:

__________________________________                  ___________________________
Signature                                                                               Date

_________________________________________
Print Name
Property Location/Address:______________________________________________________________

Tax Parcel ID:______________________________________

Zoning District:_____________________________________

Current Use of Property:______________________________________________________________

Proposed Use of Property:______________________________________________________________

Briefly describe the purpose of this application and reference the relevant sections of Chapter 480 of the City Code (please continue on a separate sheet of paper, if necessary):
________________________________________________________________________________
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List all of the names and addresses of the owners of the properties within 200 feet of the subject property measured from a right angle from all points on every property line (refer to Section 480.32 of the City Code):
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Applicant Information:

Name:_________________________________________
Phone:_____________________________________

Address:______________________________________________
Email:______________________________________________

Property Owner Information (if different from the Applicant):

Name:_________________________________________
Phone:_____________________________________

Address:______________________________________________
Email:______________________________________________

Will the applicant (s) be represented by another person or counsel?  Yes  No

If yes, please provide their name, address, phone number and email address:

Name:_________________________________________
Phone:_____________________________________

Address:______________________________________________
Email:______________________________________________

I hereby authorize the City of Pittston Council Members, City of Pittston staff and any City consultants to enter the exterior premises of this property between 8:00am and 8:00pm, at their own risk, while this application is being considered for approval, as needed to determine compliances with the City Ordinances.

___________________________________            _________________________
I/We the undersigned applicant(s), do hereby make application to the City Council of the City of Pittston for the purpose of consideration of a conditional use for the above-referenced property pursuant to the Pennsylvania Municipalities Planning Code, (Act 247 of 1968, as amended,) and Chapter 480 of the Code of the City of Pittston (as amended). My/Our signatures below certify that all of the above referenced statements and information and any additional information submitted and made part of this application are true and complete to the best of my/our knowledge and belief.

Applicant(s):

_________________________________________  ___________________________  ________________
Signature                                               Printed Name                                  Date

_________________________________________  ___________________________  ________________
Signature                                               Printed Name                                  Date

Signature of Property Owner (s):

_________________________________________  ___________________________  ________________
Signature                                               Printed Name                                  Date

_________________________________________  ___________________________  ________________
Signature                                               Printed Name                                  Date

_________________________________________  ___________________________  ________________
Signature                                               Printed Name                                  Date

Office Use Only

Date Received: _________   Fee Paid: ______   Officer: ________________________