



MILFORD TOWNSHIP
ZONING DEPARTMENT
PO Box 366
Milford, PA 18337

CONDITIONAL USE APPLICATION

PROPERTY OWNER INFORMATION (as it appears on tax statement or deed)

PLEASE PRINT LEGIBLE

First name: _____ Last name: _____

Mailing address: _____ City, State, Zip: _____

Phone Number: _____ Project Address: _____

Tax ID #: _____ Lot #: _____ Parcel Size: _____ sq ft _____

APPLICANT INFORMATION

First Name: _____ Last: _____

Applicant Address: _____ City, State, Zip: _____

Applicant Phone: _____ email: _____

BUSINESS INFORMATION:

Name of Business: _____

Owners of Business: _____

If proposed use is in an existing building, provide information about the previous use:

INFORMATION NEEDED TO COMPLETE THE APPLICATION:

1. A copy of the property deed stamped by the Recorder of Deeds office.
2. A copy of a complete Conditional Use Checklist
3. The Conditional Use Application fee of \$900.00 and a \$250.00 Stenographer's fee deposit (if applicable).
4. Letter of Intent- outline in detail the proposed Use
5. 10 complete sets of any required plans and information
6. Proof of adequate sewage disposal from S.E.O.
7. Wellhead and Watershed Protection ordinance #426.



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CONDITIONAL USE checklist (submit the following)

- ☐ **APPLICATION FORM COMPLETE**
 - ☐ **Proof of Ownership (Recorded Deed)**
 - ☐ **Applicable fees**
 - ☐ **Letter of Intent (outline in detail the proposed Use)**
- ☐ **SITE PLAN (drawn accurately to scale, see Zoning Ordinance for a required provisions)**
 - ☐ **Date, North Arrow**
 - ☐ **Legal Description of property. All property dimensions**
 - ☐ **Location of ALL proposed and existing buildings/structures**
 - ☐ **Location of ALL utilities (water, sewage, gas, electric, etc.)**
 - ☐ **Location of ALL existing and proposed parking areas, parking spaces, loading and unloading areas, access drives (include controlled access provisions) vehicle circulation patterns (ingress and egress), pedestrian access, proposed or existing signs**
 - ☐ **Indicate grading and type of wearing surface and drainage areas** ☐ **Percentage of Lot Coverage (see definition)**
 - ☐ **All proposed landscaping and fencing (if applicable)**
 - ☐ **Location/type of All existing/proposed exterior lighting (if applicable)**
 - ☐ **Copy of the approved Highway Occupancy Permit for the proposed Use**
 - ☐ **Location of trash receptacles (if applicable)**
 - ☐ **Non-Conforming Use/Buildings**

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Email: milfrdtp@ptd.net



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☐ **Architectural Plan**

- ☐ Exterior Elevations of Building, showing building materials, colors, exterior features and landscaping
- ☐ Floor plans of structure, showing dimensions and labels of all rooms. Provide existing floor plan and proposed floor plan.
- ☐ Commercial, Manufacturing & Other Non-Residential Uses
- ☐ Type of Business (i.e. retail, professional service, etc.)
- ☐ Type of Merchandise (if retail)
- ☐ Type of Service
- ☐ Hours and days of Operation
- ☐ Number of Employees
- ☐ Standards (see section 407 of the Zoning Ordinance)

This is not an all-inclusive list. The Planning Commission or Supervisors may request that additional information be submitted as part of their review.

OFFICE USE ONLY, DO NOT WRITE BELOW THIS LINE

Date Submitted: _____ Date Fee Received: _____

Date forwarded to Planning Commission: _____

Planning Commission's recommendation: ☐ Approval ☐ Denial

Date forwarded to the Township Supervisors: _____

Township Supervisor's Decision: ☐ Approved ☐ Denied Date: _____

Reason for Denial: _____
