

## Borough of Rochester

350 ADAMS STREET ROCHESTER, PA 15074 Phone: (724) 775-1200

Fax No.: (724) 775-7020

## **CONDITIONAL USE APPLICATION**

1. APPLICANT(S):		DATE:	
2. APPLICANT(S) ADDRESS:			
3. TELEPHONE: HOME		VORK	
4. ADDRESS OF PROPERTY:			
BETWEEN:(CROSS S	STREET)	(CROSS STREET)	
ZONING DISTRICT:	PARCEL #:	LOT SIZE:	
5. PROPERTY OWNER(S):			
6. PROPERTY OWNER(S) ADDRESS	S:		
7. CURRENT USE OF PROPERTY:			
8. PROPOSED USE OF PROPERTY:_			
9. CONDITIONAL USE REQUESTED	D:		

## PLEASE READ CAREFULLY:

Applications will not be accepted unless completed in full, signed, Additional attachments and supplements may be required by the(Initial Here)	
Your failure to appear at the Planning Commission meeting and will result in the dismissal of your conditional use request. It will and pay the required fee (Initial here)	
By signing below, you are stating that you are aware of thic conditional uses and have received a copy of the applicable code seare aware that all required attachments, including a site plan as submitted to the Code Enforcement Office before your request may (Initial Here)	ECTIONS. FURTHERMORE, YOU S OUTLINED IN §602, MUST BE
I / WE THE UNDERSIGNED, CERTIFY THAT THE INFORMATION AT TRUE AND CORRECT AS I / WE BELIEVE.	BOVE AND ATTACHED IS
APPLICANT(S)' SIGNATURE:	DATE:

## FOR BOROUGH OF ROCHESTER OFFICE USE ONLY

FEE: \$	COLLECTED BY:	
SITE PLAN SUBMITTED? ( ) YES CONDITIONAL USE SECTION(S): _	( ) NO	
PLANNING COMMISSION MEETING	G DATE:	
RECOMMENDATION: APPROVE ( ) DISAPPROVE ( )		
CHAIRPERSON'S SIGNATURE:		
	TE:	
ZONDIC VA DIANCE DE OVIDEDO /	) WEG ( ) NO	
ZONING VARIANCE REQUIRED? ( ) YES ( ) NO		
CODE / ZONING HEARING BOARD	DATE:	
VOTE: APPROVED ( ) DISAPPRO	OVED ( )	
APPLICATION REVIEWED BY:	ZONING OFFICER	

**NOTES:**