

BOROUGH OF CARROLL VALLEY
5685 FAIRFIELD ROAD
CARROLL VALLEY, PA 17320

APPLICATION FOR A HEARING BEFORE THE BOROUGH COUNCIL

For: Special Exception Conditional-Use Appeal

Name of Applicant:

Name of Property Owner:

Address of Applicant:

Address of Property Owner:

Parcel Address

Parcel Number

Name and address of attorney (if applicable):

Interest of Applicant:

Brief description of the property affected with specific reference to the section of the Ordinance upon which the application for Special Exception, Conditional Use, or appeal is based:

A brief statement of the relief sought, the Special Exception or Conditional Use desired; or basis for appeal:

IN ORDER TO PROCESS THE APPLICATION THE FOLLOWING MUST BE SUBMITTED:

- 1.) SIGNED APPLICATION**
- 2.) 3 COPIES OF THE PLOT PLAN AND FLOOR PLAN**
- 3.) APPLICATION FEE OF \$300**

Applicant's Signature

Date

Owner's Signature

Date

Do not write below this line Borough use only

Application Fee of \$300.00 received on

Cash

Check #

Application received By: