Clifton Township

361 State Route 435 Clifton Township PA 18424 Office: 570-842-4272 Email: Secretary@cliftontownship.com

APPLICATION TO SERVE ON THE ZONING HEARING BOARD

Full Name:	
Physical Address:	
Mailing Address:	
Email Address: Tele	ephone:
Are you a full-time resident of Clifton Township?] NO
Are you comfortable with technology (i.e. Email, Internet, Wor	d documents)?
☐ YES ☐ NO	
Do you agree to having a Criminal Background check complete	d? (at Township expense)
☐ YES ☐ NO	
For the purposes of a background check, please complete the	following:
Date of Birth:	
Social Security Number:	
Other Names:	
Signature of Applicant:	
Date:	