

Clifton Township

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

Application for Change of Use

I/We hereby represent that the information provided herein, and on the plans and documents submitted herewith, is true and correct and request that a Change of Use be issued in reliance thereon, and agree to comply with the Clifton Township Zoning Ordinances, as amended.

OWNER

Name: _____

Address: _____

Telephone: _____ Email: _____

Signature: _____

Interest in Property ☐ Owner ☐ Tenant ☐ Agreement for Sale ☐ Other

LESSEE

Name: _____

Address: _____

Telephone: _____ Email: _____

Signature: _____

STRUCTURE/PROPERTY

Address: _____

Tax Parcel (PIN) No: _____ Deed Reference: _____

Current Use: _____

Current Business Name (if applicable): _____

Proposed Use (be as detailed as possible): _____

New Business Name (if applicable): _____

Square Footage of Structure: _____ Sprinkler System: ☐ Yes ☐ No

APPLICANT: _____

Existing Size of Septic Tank: _____ gallons

Existing Size of Absorption Field: _____ square feet

Occupant Load (max # of people in structure): Current: _____ Proposed: _____

Number of Employees: Current: _____ Proposed: _____

Number of Parking Spaces: Current: _____ Proposed: _____

Proposed Date of Opening: _____

Days and Hours of Operation:

Day	Opening AM or PM	Closing AM or PM
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

Signs for Display and/or Advertising (*may require additional permitting*)

Quantity for each type of sign: Wall _____ Window _____ Roof _____ Ground _____

Other (please describe): _____

Size of Sign(s): _____

Are any of the signs illuminated: ☐ Yes ☐ No

Are any of the signs: ☐ New ☐ Existing

If both new and existing, please explain: _____

APPLICANT: _____

TOWNSHIP USE ONLY

Application Receipt Date: _____ Fee: \$ _____ Date Fee Received: _____

Received By: _____

ZONING OFFICER USE ONLY

☐ Change APPROVED

☐ Change DENIED

Reasons: _____

Date Applicant was Notified: _____

Clifton Township Zoning Officer Signature

Date