

Permit Fee: \$100.

NON-CONFORMING USE APPLICATION

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| <p>*OFFICE USE ONLY* PAYMENT INFO</p> <p>AMOUNT: \$ _____</p> <p>CHECK #: _____</p> <p>DATE: _____</p> <p>REC'D BY: _____</p> | <p>BOROUGH OF STROUDSBURG 700 SARAH STREET STROUDSBURG, PA 18360 Phone (570) 421-5444 Fax (570) 421-2690 www.StroudsburgBoro.com</p> | <p><i>Date Stamp</i> <i>(if rec'd w/o payment)</i></p> <p># _____ of Plans Rec'd by: _____</p> |
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I. PROPERTY OWNER INFORMATION

Property Owner's Name & Mailing Address:

Property Owner's Phone:

Mobile Phone:

E-mail:

II. APPLICANT INFORMATION

Applicant's Name & Mailing Address:

Applicant's Phone:

Mobile Phone:

E-mail:

III. PROPERTY INFORMATION

Address of Subject Property:

Monroe County Property Tax ID #: 1873 _____

IV. ZONING DISTRICT (Check only ONE box)

- R-1 (Low-Density Residential)
- R-2 (Medium-Density Residential)
- R-3 (High-Density Residential)
- Other: _____

- C-1 (General Commercial)
- C-1A (General Commercial A)
- C-2 (Central Business)
- C-3 (Heavy Commercial)

- MU-A (Mixed Use)
- MU-B (Mixed Use)
- I-1 (Light Industrial)
- O-1 (Open Space)

V. NON-CONFORMING USE / STRUCTURE INFORMATION

Present Use of Property:

Building Dimensions:

Date use / non-conformity was established:

Type of Non-Conformity: Use Dimensional

Describe in detail why you are requesting Non-Conforming Use Certification:

Applicant should attach location map, metes and bounds description, site plan, and any relevant information to prove continuous use of all non-conforming uses to this application.

By signing below, the Property Owner & Applicant hereby certify that the above information is correct and agree to comply with all applicable regulations of the Borough of Stroudsburg.

Property Owner's Signature:

Date:

Applicant's Signature:

Date:

APPROVAL

Zoning Officer's Signature:

Date: