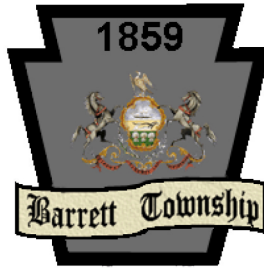


# BARRETT TOWNSHIP

Barrett Township Municipal Building  
993 Route 390  
Cresco, PA 18326



Phone: 570 595 2602  
Fax: 570 595 7550  
[www.BarrettTownship.com](http://www.BarrettTownship.com)

## CONDITIONAL USE HEARING APPLICATION

### Application requirements and regulations:

- Fees must be paid at the time of application.
- Seven (7) copies of the site plan.
- Name, address, mailing address and Monroe County Tax Map Parcel No. of all properties within 500 feet of the property line of the applicant. This includes properties across the street.
- Supplemental documents may be required to be submitted as part of this application, at the discretion of the Zoning Officer.

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Property Owner Name \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Property Owner Address \_\_\_\_\_

If different from the above noted Property Owner please indicate the following:

Applicant Name \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Applicant Address \_\_\_\_\_

Attorney/Agent Name \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

Attorney/Agent Address \_\_\_\_\_

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Property Address \_\_\_\_\_

Tax Parcel Number \_\_\_\_\_ Zoning District \_\_\_\_\_

Lot Size \_\_\_\_\_

Present Use of Property, describe \_\_\_\_\_

Proposed Use of Property, describe \_\_\_\_\_

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Request for Conditional Use under Section(s) of Township Zoning Ordinance \_\_\_\_\_

Nature of the Conditional Use requested \_\_\_\_\_

Reasons for request \_\_\_\_\_

Days and hours of operation \_\_\_\_\_

Anticipated employees: Average \_\_\_\_\_ Maximum \_\_\_\_\_

Required parking as per Township Zoning Ordinance \_\_\_\_\_

Number of parking spaces: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Do you anticipate this use to have any effect on traffic or highway safety on neighboring streets or roads?

If so, what effect? \_\_\_\_\_

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Will proposed use of the premises result in:

The dissemination of noxious, toxic or corrosive fumes, smoke, odor or dust? \_\_\_\_\_

Unusually loud noise or vibration? \_\_\_\_\_

Unusually high potential for fire or explosion? \_\_\_\_\_

Objectionable heat, glare, or radiation beyond property lines? \_\_\_\_\_

Major electrical interference beyond property line? \_\_\_\_\_

The discharge of untreated sewage or industrial waste into any stream  
or the pollution of surface or underground water? \_\_\_\_\_

The creation of any objectionable condition that will endanger public  
health and safety? \_\_\_\_\_

Does the use require storage of hazardous materials or waste on site? \_\_\_\_\_

If your answer to any of these questions is yes, please explain in detail on separate sheet and attach.

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*The undersigned, being duly sworn according to law, deposes and says that he/she is the above-named applicant, that he/she is authorized to and does take this affidavit on behalf of the owner, and that the foregoing facts are true and correct.*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

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**Township Use Only**

Date of Application \_\_\_\_\_

Fees Paid \_\_\_\_\_

Escrow \_\_\_\_\_

\_\_\_\_\_  
Zoning Officer Signature

\_\_\_\_\_  
Date