BARRETT TOWNSHIP SUPERVISORS



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BARRETT MUNICIPAL BUILDING 993 ROUTE 390 • CRESCO, PA 18326 www.BarrettTownship.com

APPLICATION FOR CERTIFICATE OF NON-CONFORMITY

1.	Applicants Name:			
	Mailing Address:			
	Phone Number:			
2.	Property Owner's Name:			
	Mailing Address:			
	Phone Number:			
3.	Relationship between applicant and owner (if not the same):			
	(Applicant is purchaser under agreement of sale* or tenant* or agent of owner*, etc)			
4.	PIN Number:			
5.	Attach Copy of Deed.			
6.	Street Address of Property:			
7.				
	The (land)(building)(structure)(sign) is used for:			
9.	Details of non-conformity are:			
10.	. Attach site layout drawn to scale indicating the following:			
	A. Actual Dimensions and Shape of Lot			
	B. Location and dimensions of non-conformity, identify specific building or structures serving the non-conformity, well and septic.			
11.	. Is property subject to deed restrictions/easements or HOA restrictions?			
	If so, list:			
	Applicant hereby authorizes members of Township Boards, staff and representatives to enter the la	nds		
	proposed for site inspections, if necessary.			
	Applicant hereby certifies the foregoing statements and data to be true and complete and if approv	ed		
	agrees to abide by all rules and regulations contained in the Barrett Township Zoning Ordinance.			
	Signature of Applicant:			
	Date:			

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	(All Items in T	his Section to Be Completed By Township)
Permit Fees: \$		
Check No.		Date Of Action:
Permit No		CERTIFICATE OF COMPLIANCE REQUIRED
		SPECIAL CONDITIONS
		ZONING OFFICER