



MUNICIPALITY OF BETHEL PARK

Municipal Building • 5100 West Library Avenue • Bethel Park, PA 15102 • 412-831-6800 • FAX 412-831-8675 • www.bethelparkpa.gov

Permit # _____

CONDITIONAL USE APPLICATION (Fee - \$700 Plus Costs Associated with Public Hearing)

Applicant Information and Authorization:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Landowner Information: Same as Applicant

If applicant is not the landowner, an option agreement or letter of authorization from the owner is required.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Site Information:

Address: _____ Parcel #: _____

Acreage of Property: _____ Zoning Classification: _____

Present Use: _____

Proposed Use: _____

Additional Information Required:

Has there been a previous application for a conditional use submitted for this property? Yes No

If yes, Date previous application submitted: _____ Results: Granted Denied

Does Applicant consent to on-site observation by Municipal Officials and/or appointees? Yes No

Is a Statement of Compliance with Applicable Standards & Criteria of Municipal Zoning Ordinances enclosed? Yes No

Signatures: *My signature on behalf of or as the owner for this permit constitutes my verification that the statements contained herein are true and I am Subject to the penalty of 18 Pa.C.S.A. §4904 relating to unsworn falsification to authorities.*

Applicant Signature: _____

For Department Use Only:

Date Application Received: _____ Fee Amount: _____ Date Fee Paid: _____