ROSS TOWNSHIP
1000 Ross Municipal Drive
Pittsburgh, PA 15237
Phone: (412) 931-7055 Fax: (412) 931-3508

CONDITIONAL USE or REZONING APPLICATION

PROPERTY INFORMATION

Property Address: _____ Zoning District: _____ Ward: _____

Owners Name: _____ Parcel Number: _____ - ___ - _____

Address: _____ Phone: ( ) _____

City: _____ State: _____ Zip Code: _____ Fax: ( ) _____

APPLICANT INFORMATION

Name: _____

Address: _____ Phone: ( ) _____

City: _____ State: _____ Zip Code: _____ Fax: ( ) _____

What is the applicant's interest in this application? ☐ Owner ☐ Agent ☐ Lessee ☐ Other -_____

_____ _____

Date of Application Signature

CONDITIONAL USE INFORMATION (if applicable)

The description of the property in this application is as follows:

Present use of Property: _____ Lot size: _____ Acres or square feet

Proposed use of Property: _____

REZONING INFORMATION (if applicable)

The description of the property in this application is as follows:

Present Zoning Classification: "_____" - _____ District

Proposed Zoning Classification: "_____" - _____ District

I / we believe that the Planning Commission should approve this request because:

_____

_____

_____

_____

STATEMENT OF TRUTH (For all applications)

COMMONWEALTH OF PENNSYLAVANIA COUNTY OF ALLEGHENY

Deponent, being duly sworn, says they are the:

☐ Owner of record of the property for which this application is made, and that all the statements and data furnished with this application are true and correct. I am also aware that independent engineering review fees are my responsibility and an escrow account fee will be collected at time of application and may have to be replenished if all funds are exhausted.

☐ Authorized agent for the owner of record of the property for which this application is made and as such has express authority to bind such owner to all terms and conditions set forth by Ross Township pursuant to this application, and that all statements and data furnished with this application are true and correct. I am also aware that independent engineering review fees are my responsibility and an escrow account fee will be collected at time of application and may have to be replenished if all funds are exhausted.

Sworn to and subscribed before me this _____ day of _____ 20 _____.

_____ _____ _____

Notary Public Applicant (signature) Applicant (printed)

DIRECTIONS FOR FILING

Twelve (12) collated sets of this application and all other pertinent information (survey, site plan, drawings, photographs, etc) are required to be submitted to the Building Inspection/Zoning Department **twenty-one (21)** days prior to the Planning Commission meeting. All specifications/drawings must be prepared and sealed by a licensed professional engineer, architect or land surveyor. Please refer to the checklist on the reverse side of this application to insure proper submittals for rezoning. Any information left blank on this application will result in your application being denied and returned to the applicant. Please note that the correct fee must be paid with your application.

FILING FEES

Conditional Use Application: $300.00 **Rezoning Application: $500.00 + $2,000.00 escrow**

REZONING CHECKLIST

Twelve (12) sets of plans must be submitted showing the following:

____ 1. Names of all abutting land areas and uses; names of owners of adjacent property

____ 2. Key map for purpose of locating the property

____ 3. Total tract boundaries and statement of total acreage (metes and bounds description)

____ 4. Zoning data - both existing and proposed

____ 5. Contour lines

____ 6. Location and elevation

____ 7. All existing sewer lines, water lines, fire hydrants, utility transmission lines, culverts, bridges, railroads, water courses, etc.

____ 8. All existing buildings or other structures

____ 9. All existing streets, thoroughfares and traffic patterns

____10. Copies of existing and proposed deed restrictions

____11. Impact statement and community advantage statement

____12. Preliminary commitment from responsible lenders

____13. Anticipated schedule of development.

____14. Agreements, provisions and covenants

____15. Twelve (12) copies of site survey, containing surveyor's seal, number, name and address

____16. Location of all proposed structures

____17. Location of parking areas and traffic zones

____18. **Agree to replenish escrow when account falls below $100.00.**

(DO NOT WRITE BELOW THIS LINE - TOWNSHIP USE ONLY)

Fee: **$** _____

Escrow: **$** _____

Application accepted: _____ **Date:** _____

Ross Township Zoning Officer

Planning Commission No.		**Invoice Number**	
Public Hearing Date		**Check Number**	
Date Hearing Advertised			
Date agenda mailed to abutting property owners		**Date Property Posted**	