



Plainfield Township

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APPLICATION FOR SPECIAL ENCROACHMENT PERMIT AND PUBLIC HEARING – PLAINFIELD TOWNSHIP OFFICIAL MAP

Date of Application: ____/____/____

GENERAL INFORMATION:

Applicant's Name _____

Address _____

Business/Cell Number _____

Email _____

Property Owner's Name _____

Address _____

Business/Cell Number _____

Email _____

Property Location: _____

Parcel #: _____ Zoning District: _____

Acreage: _____ Number of Lots: _____ Date of Purchase: _____

Present Use: _____ Proposed Use: _____

Date of Previous Application (if any): ____/____/____

Applicant's Signature _____ Date ____/____/____

REQUEST FOR SPECIAL ENCROACHMENT PERMIT

Please identify all reasons why a Special Encroachment Permit should be granted for the proposed use of the subject property in accordance with § 1-908 (Effect of Official Map and Reservations) (2) (Special Encroachment Permits) of the Plainfield Township Official Map Ordinance (Ordinance No. 398). **Specifically identify how the reserved area as shown on the Official Map cannot yield a reasonable return to the owner/applicant unless approval for the proposed building, structure or other improvement is granted by the Board of Supervisors.**

(PLEASE INSERT ADDITIONAL PAGES AS NEEDED)

I, _____, certify that all above information is true and correct to the best of my knowledge.

Applicant's Signature _____ Date ____/____/____