



## UPPER MACUNGIE TOWNSHIP CONDITIONAL USE PROCEDURES

Upper Macungie Township  
8330 Schantz Road  
Breinigsville, PA 18031

Community Development Department  
Office: 610-395-4892 Fax: 610-395-9355  
Office Hours: M-F 7:30 AM - 4:00 PM  
[www.uppermac.org](http://www.uppermac.org)

- A Conditional Use is a permitted use with an added level of public review and executive approval
- Uses that require a Conditional Use Review can be identified with a “C” listed in the Upper Macungie Township Zoning Ordinance in Section 27-306: *Table of Permitted Uses by District*.
- The Conditional Use Process allows the Board of Supervisors to have the opportunity to thoroughly examine the proposal and to impose any reasonable conditions necessary to apply the intent of the ordinance and to protect its residents’ safety, health, and welfare in accordance with Section 603(c)(2) of the Pennsylvania Municipalities Code.
- All Conditional Use Applications shall be reviewed by the Planning Commission and approved by the Board of Supervisors.
- Once a Conditional Use Application is submitted, and deemed complete, Township Staff will begin to prepare the following items in accordance with the PA Municipalities Planning Code: newspaper advertisements, a public hearing date, property postings, and notifications to adjacent property owners.
- The Planning Commission will review the proposal at their regularly scheduled meeting which the applicant will be notified of time and date of the meeting. The Planning Commission will make a recommendation, based on the applicant’s testimony, and will be forwarded to the Board of Supervisors.
- The Board of Supervisors will hold a public hearing, no more than 60 days after receipt of a complete submission, where they will approve or deny the application or schedules an additional public hearing.
- Once a decision on the application is made, the Township Solicitor will provide written correspondence of the decision.
- If the application is approved, and a written decision is received, the applicant may start submitting permit applications required by Upper Macungie Township.

Date Received: \_\_\_\_\_

Fee Amount: \_\_\_\_\_

Received By: \_\_\_\_\_

Check No.: \_\_\_\_\_



**UPPER MACUNGIE TOWNSHIP**  
**CONDITIONAL USE APPLICATION INSTRUCTIONS**

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1. Complete the application. Please print legibly or type the information. If the application submitted is not complete, the Township reserves the right to immediately deny the application and return it to the Applicant without the Planning Commission's and Board of Supervisors' review and action on the application.
2. Sign and Date the application.
3. **YOU MUST CONVINCINGLY SHOW, BOTH IN WRITING AND THROUGH TESTIMONY, HOW YOUR REQUEST MEETS THE RELEVANT CRITERIA FOR GRANTING THE REQUEST.** Attach appropriate written explanations that indicate how your request meets the criteria referenced in Section 27-118 in the Township Zoning Ordinance, in addition to Sections 27-402 & 27-403, if applicable. Attach appropriate drawings, plans, and/or illustrations which help explain your request. Three (3) copies of the proposed plan and a digital set must be submitted with the application. All materials submitted with this application or entered as Exhibits during the hearing become the property of Upper Macungie Township and are kept with this application.
4. A **COMPLETE** application, with plans, applicable reports, drawings, and any additional information relevant to the request must be submitted to the Township's Community Development Office 21 days prior to the following Planning Commission Meeting.
5. The application and all additional materials submitted with the application must be originals. The Township will not accept fax copies of any materials associated with this application.
6. The fee is currently **\$600.00 for residential and \$800 for non-residential inquiries plus all costs incurred over this amount by the Township** for a Conditional Use Application. Fees are subject to change at any time and are determined by the Board of Supervisors and approved through a Resolution. This fee must be paid in full at the time of application submission or the application will not be accepted. Checks are to be made payable to Upper Macungie Township. The Township cannot accept credit card payments for this application.
7. There may be additional review fees that incur during the application process. All additional review fees will be charged to the Applicant and must be paid in full by the Applicant prior to any approval and/or issuance of certificates.
8. I/We have read and understand the directions:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name



# UPPER MACUNGIE TOWNSHIP CONDITIONAL USE APPLICATION

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Office: 610-395-4892  
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Office Hours: Monday through Friday 7:30 A.M. to 4:00 P.M.

Property Location/Address: _____
Tax Parcel ID # _____ Zoning District: _____
Current use of property: _____
Proposed use of property: _____

Briefly describe the purpose of this application and reference the relevant sections of Chapter 27 of the Township Code (*please continue on a separate sheet of paper, if necessary*): \_\_\_\_\_

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List all of the names and addresses of the owners of all of the properties adjacent and across the street to the subject property (*please continue on a separate sheet of paper, if necessary*):

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# CONDITIONAL USE APPLICATION

## CONTACT INFORMATION

### Applicant Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Property Owner Information *(if different from the Applicant):*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Will the applicant (s) be represented by another person or counsel?       Yes       No

If yes, please provide their name, address, phone number & email address:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

I hereby authorize the Board of Supervisors, Planning Commission, Township Staff, and any Township consultant to enter the exterior premises of this property between 8:00 a.m. and 8:00 p.m., at their own risk, while this application is being considered for approval, as needed to determine compliances with Township Ordinances.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

I/We the undersigned applicant(s), do hereby make application to the Upper Macungie Township Board of Supervisors for the purpose of consideration of a conditional use for the above-referenced property pursuant to the Pennsylvania Municipalities Planning Code, (Act 247 of 1968, as amended), and Chapter 27 of the Code of the Township of Upper Macungie, (as amended). My/Our signatures below certify that all the above referenced statements and information and any additional information submitted and made part of this application are true and complete to the best of my/our knowledge and belief.

### Applicant(s):

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

### Signature of property owner(s), (If different from applicant):

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date