



# Jefferson Township Zoning Administration

## SPECIAL LAND USE APPLICATION

APPLICANT (Property Owner: \_\_\_\_\_)

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

ALTERNATIVE ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

PROPERTY ID: \_\_\_\_\_ ZONING CLASS \_\_\_\_\_

SIZE OF SUBJECT PARCEL: \_\_\_\_\_

GENERAL DESCRIPTION OF THE PROPOSED SPECIAL LAND USE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

APPLICATION FEE: (\$500)      Date Received: \_\_\_\_\_

Signature: \_\_\_\_\_