

# LYNN TOWNSHIP LEHIGH COUNTY

7911 Kings Highway • New Tripoli, PA 18066 • (610) 298-2645 • Fax (610) 298-2896  
Website: [www.lynnntp.org](http://www.lynnntp.org) • email: [Trishb@lynnntp.org](mailto:Trishb@lynnntp.org)

## CONDITIONAL USE PROCEDURES

A conditional use is a use permitted within a particular zoning district subject to approval by the Board of Supervisors ("Board"). The Board, in entering a decision granting an application for conditional use, may attach such reasonable conditions and safeguards, in addition to those set forth in its Ordinances, as the Board may deem necessary to implement the purposes of its Ordinances.

A conditional use submission shall not be considered officially accepted for review until any needed zoning relief which is directly relevant to the site layout and nature of the conditional use is granted. The Zoning Officer shall report in writing whether the proposal complies with Township Ordinances. The Zoning Officer may request a review by the Township Engineer.

The completed conditional use applications shall be forwarded to the Planning Commission who shall make a written recommendation to the Board concerning the conditional use application.

The Board of Supervisors shall hold a public hearing, not more than 60 days after receipt of a completed submission (unless the applicant has requested in writing and the Planning Commission or Board has accepted an extension of time thereof). Public notice of the hearing shall be given by the Township as required by law. In addition, written notice by first-class certified mail, return receipt requested, shall be provided by the Township by sending a copy of the published hearing notice to the applicant and all adjacent property owners. Written notice will also be given by the Township to the any of the following: all property owners within 200 feet of the boundaries of the lot or tract that is the subject of the conditional use application, any other person or group who have made prior written request to the Township to be notified of such hearing, and the Municipal Secretary of any neighboring municipality with real estate within 500 feet of the boundary. The list of property owners and addresses, as required, shall be provided by the applicant.

The Board shall render a written decision or make written findings of fact (when no decision is called for) on whether the conditional use meets the requirements of its Ordinance and applicable law, within 45 days after the last hearing before the governing body

Township Use Only:	
Date Received: _____	Fee Amount: _____
Received By: _____	Check Number: _____
Planning Commission Date: _____	Board Hearing Date: _____

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**CONDITIONAL USE APPLICATION INSTRUCTIONS**

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 Sections 27.501-503 in the Township Zoning Ordinance, in addition to Sections 27.404-406, if applicable. Attach appropriate drawings, plans, and/or illustrations which help explain your request. Ten (10) 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 Lynn 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 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 escrow fee is currently \$1000.00 for residential and \$2500.00 for non-residential inquires 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. The 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 Lynn 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 procedures and directions.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature(s)

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

\_\_\_\_\_  
Print Name(s)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

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## CONDITIONAL USE APPLICATION

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

Briefly describe the purpose of this application and reference the relevant Sections of 27.404-406 and 27.501-503 of the Township Code of Ordinances. (please continue on a separate sheet of paper if necessary):

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List all the names and mailing addresses of the owners of all properties within 200 feet of the boundaries of the tract or lot that is subject of the conditional use application, noting any such properties which are directly adjacent, and the name and address of any municipality within 500 feet of the boundaries of the lot or tract which is the subject of the conditional use application (please continue on a separate sheet of paper if necessary):

<u>Tax Map # or Pin #</u>	<u>Owner Name(s)</u>	<u>Owner Address</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**CONDITIONAL USE APPLICATION**  
(Contact Information)

**Applicant Information:**

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

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

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

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

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

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

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

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

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

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 compliance with Township Ordinances.

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

I/We the undersigned applicant(s), do hereby make application to the Lynn 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 and Township Ordinances. 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

**Property owner(s), (if different from applicant):**

\_\_\_\_\_  
Signature Print Name Date