



Application # \_\_\_\_\_  
Date Received \_\_\_\_\_  
Fee \$ \_\_\_\_\_

### CONDITIONAL USE APPLICATION

*Willistown Township  
688 Sugartown Road  
Malvern, PA 19355*

Phone 610.647.5300 Fax 610.647.8156

**Property Address/Site Location:**

Property Owner \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Zoning District \_\_\_\_\_ Tax Parcel(s) # \_\_\_\_\_

Applicant (if different) \_\_\_\_\_ Telephone Number \_\_\_\_\_  
E-Mail \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Attorney Information:**

Attorney for Applicant \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
E-Mail \_\_\_\_\_

**Articles and Sections of the Township Code requesting relief:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Required Submittal Items**

- 1. **Attach narrative explaining your request in detail.**
- 2. **Submit two (2) sets of plans, one (1) electronic (PDF).**
- 3. **Check made out to "Willistown Township": \$1,000 (Residential) / \$1,500 (Non-Residential).**

**Property Owner's Signature** \_\_\_\_\_ Date \_\_\_\_\_

Print Property Owner's Name \_\_\_\_\_

**PLANNING COMMISSION REVIEW IS REQUIRED – YOUR ATTENDANCE IS NECESSARY**  
**Contact the Planning Director at 610.647.5300x243 to schedule your appearance.**

*No application will be considered or referred to the Board of Supervisors until the application fee has been paid and reviewed for completeness.*

## Application Instructions & Procedures

- ✓ The application must be filled out in full. If information or submittal items are missing, the application will be deemed incomplete and returned to the applicant.
- ✓ The application MUST be signed by the property owner.
- ✓ An attorney is not required but the Board of Supervisors act as a quasi-judicial board and proceedings are done as such.
- ✓ Please fill out all sections of the Township Code that relief is sought.
- ✓ The following items must be included with the completed application:
  - Detailed narrative of the relief sought citing the appropriate zoning section.
  - Two (2) copies of all plans and exhibits.
  - One (1) electronic copy of all plans and exhibits in PDF format.
  - Check made out to “Willistown Township” with the appropriate fee.
    - \$1,000 – Residential
    - \$1,500 – Non-Residential
- ✓ Once the application is submitted the Township has 60 days to schedule a hearing.
- ✓ The following notifications/postings of the hearing are done by the Township:
  - Mailing sent to all properties 500’ on the same street.
  - Mailing sent to all properties 150’ on adjacent streets.
  - Subject property has a notice posted on the property.
  - Notice of the hearing is published in the Daily Local News.
  - Notice of the hearing is posted on the Township website.
- ✓ All Conditional Use applications are heard in front of the Willistown Township Planning Commission prior to the Conditional Use Hearing. The applicant must make arraignments to be placed on the Planning Commission agenda by contacting the Planning Director at 610-647-5300 x243.
- ✓ The Board of Supervisors has 45 days to render a decision following the close of the hearing(s).
- ✓ Any continuation requested by the applicant will be charged a \$500 fee.

NOTE: The Board of Supervisors or Zoning Officer(s) cannot give legal advice or gauge how a decision will be rendered.