Mount Pocono Borough Tel 570-839-8436 1361 Po Fax 570-839-0981 Mount I

1361 Pocono Blvd., Suite 100 www.mountpocono-pa.gov Mount Pocono, PA 18344

APPLICATION FOR CERTIFICATE OF NON-CONFORMITY

1.	. Applicants Name:	
	Mailing Address:	
	Phone Number:	
	Email:	
2.	. Property Owner's Name:	
	Mailing Address:	
	Phone Number:	
3.	. Relationship between applicant and owner (if not the same):	
	(Applicant is purchaser under agreement of sale* or tenant* or agent of owner*, etc)	
4.	. PIN Number:	
5.	. Attach Copy of Deed.	
6.	. Street Address of Property:	
7.	. Zoning classification of property: of adjoining property	
8.	. The (land)(building)(structure)(sign) is used for:	
9.	. Details of non-conformity are:	
10.	0. Attach site layout drawn to scale indicating the following:	
	A. Actual Dimensions and Shape of LotB. Location and dimensions of non-conformity, identify specific buildings or structures serving the	non
	conformity, well and septic.	11011-
11.	Is the property subject to deed restrictions/easements or HOA restrictions?	
	If so, list:	
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	cant hereby authorizes members of Borough Boards, staff, and representatives to enter the lands propassections, if necessary.	oseu ioi
	cant hereby certifies the foregoing statements and data to be true and complete and if approved, agreed by all rules and regulations contained in the Mount Pocono Borough Code.	es to
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Signatu	ture of Applicant: Date:	