



SPRING GARDEN TOWNSHIP

ADMINISTRATION • 340 TRI HILL ROAD, SUITE A

YORK, PA 17403-5709

PHONE NUMBER: 717.848.2858

APPLICATION TO REGISTER A NONCONFORMING USE OR STRUCTURE

Property Address		UPI: Tax Map & Parcel Number	
		48-000-_____	
Applicant			
Name: (Last, First)			Tele #:
Full Address: (house #, street, city, state, zip)		Applicant Email:	
Property Owner			
Name: (Last, First)			Tele #:
Full Address: (house #, street, city, state, zip)		Property Owner Email:	
Type of Use Requested		Type of Structure	
	Single Family Dwelling		Brick
	No Impact Home Business		Concrete Block
	Retail Store or Shop		Stone
	Professional Office		Metal
	Personal Service Business		Wood
	Other:		Other:

Date of Occupancy: _____

Description of Nonconformity: _____

It shall be the Applicant's burden to prove that a Nonconformity has been in existence for more than ten (10) years. Affidavits of two person who have personal knowledge of the existence of the nonconformity, dated photographs or other reliable evidence shall be presented by the Applicant.

Examples: Certificates of Zoning approval, building permit, occupancy permit, approved site plan or as-built plan, lease agreements, sworn notarized affidavits from persons with knowledge of the use, tax payment records, letters or bills from utility companies, dated photographs, license(s), bills and/or receipt from customers/vendors.

Signature of Applicant: _____

Fee \$50.00 Check # _____ Cash _____ Date _____