

FORKS TOWNSHIP 1606 Sullivan Trail, Easton, PA 18040

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 the agreement of sale* or tenant* or agent of owner*, etc)
4.	Tax ID Number:
	Attach a Copy of the Deed.
6.	Street Address of Property:
7.	
	The (land)(building)(structure)(sign) is used for:
10.	Attach site layout drawn to scale indicating the following:
	A. Actual dimensions and shape of the lot
	B. Location and dimensions of the non-conformity, identify specific buildings or structures
4.4	serving the non-conformity, well and septic.
11.	Is the property subject to deed restrictions/easements or HOA restrictions?
	If so, list:
	nt hereby authorizes members of Township Boards, staff, and representatives to enter the lands proposed inspections, if necessary.
	int hereby certifies the foregoing statements and data to be true and complete and if approved, agrees to by all rules and regulations contained in the Forks Township Code.
Cianatu	ure of Applicants