

**TOWNSHIP OF WHITEHALL**  
**USE APPLICATION AND PERMIT**

(as required by Township Zoning Ordinance and Amendments thereto)

**USE PERMIT NO.:** \_\_\_\_\_

**DATE ISSUED:** \_\_\_\_\_

610-437-5524 Ext. 1155

**This form MUST be filled out and signed by the OPERATOR/OWNER of the proposed business/activity.**

**A. LOCATION, OWNERSHIP & PRESENT USE OF PROPERTY:**

1. Site Address \_\_\_\_\_
2. Property Owner \_\_\_\_\_
3. Property Owner Address \_\_\_\_\_
4. Property Owner Email \_\_\_\_\_
5. Property Owner Phone \_\_\_\_\_
6. Present Use of Structure/Land \_\_\_\_\_  
If residential – Number of families \_\_\_\_\_

Application is hereby made for a permit to use the premises for the purposes described herewith. The information which follows, together with location diagram, is made part of this application by the undersigned. It is understood and agreed by this applicant that any error, misrepresentation of material fact, either with or without intention on the part of this applicant, such as might or would operate to cause a refusal of this application, or any change in the location, size or use of structure or land made subsequent to the issuance of this permit, without approval of the Zoning Officer, shall constitute sufficient ground for the revocation of this permit. All statements made herein are true and correct and all supporting documents hereto are true and correct and will be adhered to in every respect.

**B. PROPOSED USE OF STRUCTURE AND/OR LAND:**

**1. Check one:**

- \_\_\_ Change of use in existing structure
- \_\_\_ Change of ownership of existing business
- \_\_\_ Home occupation
- \_\_\_ Kiosk/cart
- \_\_\_ In-line store
- \_\_\_ Other \_\_\_\_\_

2. Proposed use of structure/land \_\_\_\_\_  
If residential – Number of families \_\_\_\_\_
3. Proposed Business Name \_\_\_\_\_
4. Nature of Business (Explain) \_\_\_\_\_

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5. Business Email \_\_\_\_\_
6. Business Website Address \_\_\_\_\_
7. Business Phone Number \_\_\_\_\_
8. Number of Employees \_\_\_\_\_
9. Number of Company Owned Vehicles \_\_\_\_\_

**C. OWNER OF BUSINESS:**

1. Applicant Name \_\_\_\_\_
2. Applicant Mailing Address \_\_\_\_\_
3. Applicant Phone \_\_\_\_\_
4. Applicant Email \_\_\_\_\_

**Certify that all information contained in Sections A, B & C are correct and will be adhered to:**

Applicant's Signature \_\_\_\_\_ Date: \_\_\_\_\_

**FOR HOME OCCUPATIONS** – If applicant is not the property owner, certification must be provided evidencing property owner's permissions for application to be made in the form of a signed, notarized statement. See development support staff for landlord release form.

**FOR OFFICE USE**

**REFERENCE:** Plan is attached hereto: Yes \_\_\_\_\_ No \_\_\_\_\_

Transfer of original Use Permit No. \_\_\_\_\_

**APPROVAL & DATES OF ACTION TAKEN:**

1. Application Approved: Yes \_\_\_\_\_ No \_\_\_\_\_

Date \_\_\_\_\_ Zoning District \_\_\_\_\_

Zoning Officer \_\_\_\_\_

Conditions of Approval \_\_\_\_\_

2. Reason for DENIAL of Application \_\_\_\_\_

NOTE: This permit applies to USE only and shall not relieve applicants from obtaining such other permits as may be required by law. NOTICE: Violation of any provision of this ordinance by any owner or lessee or other person shall constitute a violation of Whitehall Township zoning ordinance and appropriate enforcement will ensue.

**COMMERCIAL FEES:** (Must include parking plan. If

RESTAURANT, include seating plan AND parking plan)

- ☐ Temporary Use (per event): \$1,000.00
- ☐ Commercial /Industrial / All Others: \$250.00
- ☐ Kiosk / Cart within existing enclosed retail areas: \$75.00
- ☐ Transfer Fee: 25% of original fee

**RESIDENTIAL FEES:**

- ☐ No Impact Home Occupation: \$25.00
- ☐ Impact Home Occupation: \$50.00
- ☐ Family Day Care: \$50.00

REVISED March 2025