



APPLICATION FOR CONSIDERATION OF A MODIFICATION
Ferguson Township, Centre County

Submittal Date: _____

A fee of \$50.00 is required at the time of submitting this application.

The undersigned hereby applies for approval of a modification/waiver, submitted herewith and described below:

Applicant Information

Name

Street Address

City

Zip

Phone Number

Property/Plan Information

Plan Name

Plan Number

Plan Date

Project Location

Parcel Number

Name of Property Owner(s)

Street Address

City

Zip

Application Type:

Subdivision

Terraced Streetscape District (TSD)

Land Development

Traditional Town Development (TSD) District

Modification/Waiver Request Information

Specific Section(s) of the Subdivision and Land Development Ordinance or Design Standards for which a Modification/Waiver is requested:



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State any proposed alternative(s) to the requirement:

Please state in full, the grounds and facts of the unreasonableness or hardship the Ferguson Township Subdivision and Land Development Ordinance has placed on the property.

*If necessary, please continue with your hardship specification on another page.

The undersigned hereby represents that, to the best of their knowledge and belief, all information listed above is true, correct, and complete.

Signature

Date

-For Office Use Only-

Date Received: _____ By: _____

Date Paid: _____ Check No.: _____ Amount: _____

Advertisement Dates: _____ Planning Commission Review Date: _____

Board of Supervisors Meeting Date: _____