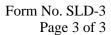


## REQUEST FOR A WAIVER OR MODIFICATION

	Official Use Only Application No.: Fee \$: Date Paid:
ONLY SIGN REQU	PLANNING COMMISSION SHALL CONSIDER AS OFFICIALLY RECEIVED THOSE APPLICATIONS THAT ARE ADMINISTRATIVELY COMPLETE, ED, HAVE ATTACHED THE CORRECT NUMBER OF COPIES OF ALL IRED EXHIBITS AND DATA, AND FOR WHICH THE FILING FEE AND ICATION FEE ARE PAID IN FULL.
TO B	E COMPLETED BY APPLICANT:
1.	Name of Applicant(s):
2.	Address of Applicant(s):
3.	Telephone Number where Applicant can be reached during normal business hours:
4.	E-Mail address of Applicant:
5.	Applicant's Attorney:
6.	Applicant's Land Surveyor, Engineer, and/or Architect and Telephone No(s).:
7.	Tax Parcel Number(s) of property under consideration:
8.	General location of property to be affected by proposed amendment:



C	General location of property under consideration:		
N	Street Number:		
N	Owner(s) of property under consideration: Name: Address: Name: Address:		
]	Name of Subdivision/Land Development:		
	Has an Application for a Land Subdivision or Land Development been submitted to the Township? Yes □ No □		
	Date Submitted Application Submitted by		
ex	pecify the precise relief requested in terms of dimensional requirements or similar terms and reference the relevant section of the Land Subdivision and Land		
D	evelopment Ordinance No. 1-2003 from which relief is sought:		
 E	Exhibit:(specify title of plan or exhibit)		
	Exhibit:(specify title of plan or exhibit)  Exhibit:		
Ε	Exhibit:		
E	Exhibit:(specify title of plan or exhibit)  Exhibit:		
E	Exhibit:  (specify title of plan or exhibit)  Exhibit:  (specify title of plan or exhibit)  Exhibit:		





I, the undersigned applicant, am the Owner (or the property and the statements herein are true and corr	9 ,
(Applicant's Signature)	(Date)