



RED LION BOROUGH

717-244-3475 Fax 717-246-0455

CERTIFICATE OF USE APPLICATION

NAME OF BUSINESS _____

ADDRESS/LOCATION OF PROPERTY _____

ZONING _____ **TAX MAP** _____ **PARCEL #** _____

BUSINESS OWNER:

Name _____

Address _____

Phone _____

E-mail _____

Website _____

PROPERTY OWNER:

Name _____

Address _____

Phone _____

EXISTING USE _____ **PROPOSED USE** _____

DESCRIPTION OF PROPOSED USE _____

NUMBER OF EMPLOYEES _____

HOURS OF OPERATION _____

APPLICATION FEE **\$25.00**

Applicant Signature _____ Date _____

Variance or Special Exception needed? _____

Approved _____ Date _____

If so, supply Case # _____

Signature _____