

# Borough of Lansdale

One Vine Street, Lansdale, PA 19446  
Phone: (215) 361-8333 Fax: (215) 361-8393

## Change of Use Permit Application

Please Print All Information (except required signatures)

**FOR BOROUGH USE ONLY:**

Site's Street Address: \_\_\_\_\_  
Nearest Cross-Street: \_\_\_\_\_ Subdivision: \_\_\_\_\_ Lot #: \_\_\_\_\_

Permit #: \_\_\_\_\_  
Tax Map Parcel #: \_\_\_\_\_

Applicant Name: _____	Record property Owner: _____
Mailing Street Address: _____	Mailing Street Address: _____
City, State & Zip Code: _____	City, State & Zip Code: _____
Phone Number (H): (____) _____	Phone Number (H): (____) _____
Phone Number (W): (____) _____	Phone Number (W): (____) _____
Email: _____	Email: _____

Site is **CURRENTLY** Used For (circle all that apply):

Land Only  Residential  Commercial  Industrial  Vacant

If Residential Use, indicate the Number of Existing Dwelling Units: \_\_\_\_\_ How Many Are Rental Units?: \_\_\_\_\_

Are **ALL** Rental Occupants listed with the Borough? – REGISTRATION REQUIRED (circle one): N/A  Yes  No

Are there **ANY** Roomers, Boarders, Lodgers, etc. residing at this site? – PERMIT REQUIRED (circle one): Yes  No

If Commercial/Industrial Use(s), indicate the Number of Individual Businesses on property: \_\_\_\_\_

Are **ALL** Individual Businesses displaying a Borough Certificate of Occupancy? – REQUIRED (circle one):  No

Yes Is this a change of occupancy classification per the 2015 IBC? Yes  No

If yes, – Accessibility update and/or application for permit may be required.

<b>The CURRENT/EXISTING</b> Use: _____	
<b>The PROPOSED</b> Use: _____	
<b>Two (2) copies of Site Plan REQUIRED</b>	
Existing Number of Residential Units: # _____	Proposed Number of Residential Units: # _____
Existing Number of Commercial Units: # _____	Proposed Number of Commercial Units: # _____
Check <b>ALL</b> PROPOSED activities to occur at property:	
Manufacturing <input type="checkbox"/> Storage of Hazardous Materials <input type="checkbox"/> Excessive Noise <input type="checkbox"/>	
Exhaust Fumes <input type="checkbox"/> Food Prep <input type="checkbox"/> Assembly/Meeting Room Use <input type="checkbox"/> Daycare <input type="checkbox"/>	

The undersigned hereby affirms that the foregoing information and attachments are true and correct to the best of said persons knowledge, information, and belief; said affirmation being made to the penalties prescribed by 18 Pa. C.S.A., Section 4904 (un-sworn falsification to authorities).

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Applicant's Signature (REQUIRED)                      Date

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Property Owner's Signature (REQUIRED)                      Date