

SHOHOLA TOWNSHIP

159 Twin Lakes Road, Shohola, PA 18458
(570) 559-7394 (570) 559-7523 (fax)

APPLICATION FOR LERTA TAX EXEMPTION PER ORDINANCE 75.

(For Office Use Only)

<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Date of Decision _____	Reason for Denial (if denied) _____ _____ _____
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APPLICANT INFORMATION

By making this application, and affixing my signature below, I hereby give my consent and authorization to Shohola Township Officials to enter on my property for the purpose of conducting necessary inspections with respect to this application for tax exemption.

1. Please list all title owners' of the eligible property below:

<u>Name</u>	<u>Address</u>	<u>Phone</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Location of eligible property (911 Address): _____

3. Tax Map I.D. Number: _____

4. Intended Use: Commercial Industrial

Please specify the type of use as described by the Shohola Township Zoning Ordinance: _____

5. Please list all applicable permits and approvals currently relating to the eligible property (including but not limited to: building, sewage, well, road encroachment, conditional use, and land development):

<u>Type of Permit/Approval</u>	<u>Date Issued</u>	<u>Date Expires</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

6. Project Engineer (if applicable): _____
Address/Phone: _____

7. General Contractor (if applicable): _____
Address/Phone: _____

8. A general description of the construction and/or improvement(s) for which exemption is claimed (including the type, nature, and extent of such construction/improvement(s): _____

9. Date of issuance of building permit for the construction/improvement(s) set forth above (or if no building permit required, the date upon which commenced or is expected to commence): _____

10. Actual Cost (or estimated anticipated cost) of construction/improvement(s) for which exemption is claimed: _____

By signing below, I certify that I am authorized to make this application on behalf of all title owners of the real property that is the subject application, that the information contained herein is true and correct to the best of my knowledge, and that I have reviewed and am familiar with the requirements of Ordinance 75 of Shohola Township.

Dated: _____
Print name: _____