

APPLICATION FOR GRANT OF EASEMENT

Borough of Bellefonte

Fee: \$300.00

Date: _____

Applicant: _____

Applicant's Address: _____ Tax Parcel No. _____

Phone: _____ Email: _____

Owner of Record: _____

Address: _____ Tax Parcel No. _____

Phone: _____ Email: _____

I hereby apply to the Bellefonte Borough Council for a Grant of Easement:

Please answer and complete all of the following information before returning to the Borough office.

1. Location of Municipal R-O-W for which Easement is requested:

2. Current Zoning District _____

3. Reason for requested Easement _____

4. Applicant shall provide signature on application and all submitted documents including but not limited to:

- a. Drawing showing property, size of property, abutting property owners, proposed easement location and set back lines.**
- b. Other pertinent data.**

I/We certify that the above information is correct and further agree to reimburse Bellefonte Borough for the cost of engineering services, materials testing, and other site inspections as required by Bellefonte Borough.

Respectfully submitted,

(Signature of Applicant)

(Date)