



Township of Tobyhanna  
 105 Government Center Way  
 Pocono Pines, PA 18350  
 (570) 646-1212

Certificate of Use and Occupancy  
 Application for Change of Use

**Owner of Property:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_

Email: \_\_\_\_\_ Property Tax No. \_\_\_\_\_

Previous Use: \_\_\_\_\_

**Leasee of Property:** \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_

Email: \_\_\_\_\_ Name of Proposed Business: \_\_\_\_\_

To Be Submitted with the Application

- Floor Plan of area to be occupied (drawn to scale)
- Plot Plan depicting existing and proposed improvements
- Copy of PennDot Highway Occupancy Permit or Township Encroachment Permit
- Plan depicting current number of parking spaces and lighting on site

Confirmation of adequate Sewer System Capacity may require further documentation or testing as determined by the Sewer Enforcement Officer

Plan must be submitted to the Building Code Official for approval as well.

**By signing this Application, I certify that all facts set forth within this Application and all accompanying documentation are true and correct. This Application is being made by me to induce official action on the part of Tobyhanna Township, and I understand that any false statements made herein are being made subject to the penalties of 18Pa C.S. 4904 relating to unsworn falsification to authorities.**

Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Owner: \_\_\_\_\_

Print Name: \_\_\_\_\_ Date \_\_\_\_\_

Signature of Leasee: \_\_\_\_\_

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Approval of Sewage Enforcement Officer: \_\_\_\_\_ Date \_\_\_\_\_

Approval Of Zoning Officer: \_\_\_\_\_ Date \_\_\_\_\_