

ZONING HEARING BOARD

(FOR THE APPLICANT AND BOROUGH RECORDS)

DO NOT WRITE IN THIS SPACE. FOR OFFICE USE ONLY.	
Date Hearing Advertised _____	Appeal No. _____
Fee Paid - Receipt No. _____	Date _____

BOROUGH OF HEIDELBERG ZONING HEARING BOARD
NOTICE OF APPEAL / VARIANCE APPLICATION

(I) (We) _____ of _____
 (Name) (Mailing Address)

request that a determination be made by the Zoning Hearing Board on the following application:

An interpretation of;
 A special exception to;
 a variance is requested to;

Article _____, in particular, Section _____, Subsection _____, Paragraph _____ of the Zoning Ordinance
 for the reason that:

It is an appeal for an interpretation of the ordinance or map.
 It is a special exception to the ordinance on which the Zoning Hearing Board is required to pass.
 It is a request for a variance relating to the area frontage yard height use or
 _____ provisions of the ordinance
 (state, if request is for purpose other than those enumerated)

The description of the property involved in this appeal is as follows:

Location _____

Lot / Block _____

Lot size _____ Present Use _____ Zone _____

District _____

Present Improvements Upon Land: _____

Proposed Use: _____

(I) (We) believe that the Board should approve this request because: (includes the grounds for appeal or reasons both with respect to law and fact for granting the appeal or special exception or variance, and if hardship is claimed, state the specific hardship.

Has any previous application or appeal been filed in connection with these premises?

Yes _____

No _____

What is the applicant's interest in the affected premises?

—

(Owner, Agent, Lessee, etc.)

What is the approximate cost of the work involved? _____

Following are the names and addresses of owners of property within a distance of 300 feet from the exterior limits of the property involved in this matter as shown by the latest assessment roll of the County of Allegheny.

NAME	ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

NOTE: This application must be filled out in triplicate. The original shall be deposited with the Secretary of the Zoning Hearing Board and a copy with the Building Inspector. A copy of the plan of real estate affected showing location and size of lot, the size of improvements now erected or proposed to be erected, or other change desired, together with any other information required by the Zoning Hearing Board, must be attached to each copy of this application. If more space is required, attach a separate sheet to each copy of this application and make specific reference to the question being answered.

I hereby certify that all if the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief.

Signature

Zoning Officer Signature

Date Accepted

Area Code Telephone Number

Dated _____, 20____

Fee Paid

Amount