BOROUGH OF BENTLEYVILLE, WASHINGTON COUNTY
ZONING HEARING BOARD APPLICATION

TYPE OF APPLICATION:

____ VARIANCE ____ USE BY SPECIAL EXCEPTION
____ APPEAL FROM DECISION OF ZONING OFFICER ____ VALIDITY CHALLENGE
____ OTHER _____
(Please specify)

LOCATION OF PROPERTY _____
COUNTY ASSESSOR'S LOT AND BLOCK NUMBER FOR PROPERTY _____
ZONING CLASSIFICATION _____ PRESENT USE OF PROPERTY _____
EXISTING IMPROVEMENTS ON PROPERTY _____
PROPOSED USE AND/OR IMPROVEMENTS ON PROPERTY _____
APPROXIMATE COST OF PROPOSED IMPROVEMENTS $_____

LANDOWNER'S NAME _____
LANDOWNER'S ADDRESS _____
LANDOWNER'S PHONE NUMBER _____

APPLICANT'S NAME _____
(If different from landowner)
APPLICANT'S ADDRESS _____
APPLICANT'S PHONE NUMBER _____

IF APPLICANT IS NOT LANDOWNER, EVIDENCE OF AUTHORIZATION TO ACT ON BEHALF OF LANDOWNER
_____ ATTACHED _____ NOT APPLICABLE

APPLICABLE SECTIONS OF BOROUGH ZONING ORDINANCE UNDER WHICH THE APPLICATION IS FILED:

_____

REASONS ZONING HEARING BOARD SHOULD GRANT REQUEST: (Attach additional sheet, if necessary)

_____

_____

HAS ANY PREVIOUS APPLICATION BEEN FILED WITH THE BOARD FOR THE PROPERTY?
____ YES ____ NO IF YES, GIVE DATE AND NATURE OF APPLICATION:

_____

CONTENT OF APPLICATION:

____ PLOT PLAN OF PROPERTY
____ LIST OF NAMES AND ADDRESSES OF PROPERTY OWNERS WITHIN 300 FEET OF ENTIRE PERIMETER OF PROPERTY (INCLUDING ACROSS THE STREET) FROM LATEST ASSESSMENT ROLL OF WASHINGTON COUNTY
____ EVIDENCE OF OWNERSHIP OF PROPERTY

APPLICATION FILING FEE: $ _____ DATE PAID _____ CHECK # _____
STENOGRAPHER'S APPEARANCE FEE: $ _____ DATE PAID _____ CHECK # _____

I, _____, hereby depose and say that all the above statements and the statements contained in the materials submitted herewith are true and that I understand that I must abide by all applicable Borough Ordinances.

SIGNATURE OF APPLICANT:
DATE:

APPEAL NO. _____ HEARING DATE: _____ DATE OF DECISION: _____