

The application will be reviewed at the Planning Commission's meeting held on the 3rd Tuesday of each month and the Board of Supervisors' meeting held the 4th Wednesday of each month (unless otherwise noted) prior to the Zoning Hearing Board meeting held on the 1st Thursday of each month. Since the Board of Supervisors and/or Planning Commission may take a position in opposition to your appeal, you may wish to attend all meetings.

PC Meeting Date: _____

BOS Meeting Date: _____

ZHB Meeting Date: _____

NEWTOWN TOWNSHIP ZONING HEARING BOARD
100 Municipal Drive
Newtown, PA 18940

APPLICATION FOR HEARING

*One notarized copy of this application complete with **35 copies** of plans and drawings must be submitted to the Zoning Officer together with the application fee. **Large plans must be folded, not rolled.** No application will be accepted or processed without appropriate plans and fees.*

Appellant/Applicant _____
Name

_____ Address Phone

Owner _____
Name

_____ Address Phone

Attorney/Agent _____
Name

_____ Address Phone

If applicant is not owner, state applicant's authority to submit this application (equitable owner, agent, lessee, etc.)

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The undersigned hereby: (check applicable item or items)

- appeals from the action of the zoning officer
- request a special exception
- requests a variance
- challenges the validity of the zoning ordinance or map

Address of premises _____

Description of premises:
(Attach plan of lot and improvements both existing and proposed)

Tax parcel no. _____ Date of present deed _____

Present zoning classification _____

Present use _____

Lot size _____

Nature of Improvements:

Present _____

Proposed _____

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1. Use in the case of an appeal from an action of the zoning officer:

The action taken was _____

The date of the action was _____

The forgoing action was in error because _____

2. Use for special exception request:

Nature for special exception sought is _____

The special exception is permitted under Article _____ Section _____
Subsection _____ of the Joint Municipal Zoning Ordinance of 1983, as amended

If more than one special is requested, list all ordinance references and the nature of the exceptions sought:

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3. Use for variance request:

The nature of variance sought is _____

The variance is from Article _____ Section _____ of the Joint Municipal Zoning Ordinance of 1983, as amended.

If more than one variance is requested, list all ordinance references and the nature of the variances sought:

The nature of the unique circumstances and the unnecessary hardship justifying this request for a variance is:

4. Use in a challenge to the validity of a zoning ordinance or map:

The ordinance or map challenged is as follows:

The challenge is appropriate for decision because:

ZHB Application

The ordinance being challenged is invalid because:

5. Have there been any previous zoning appeals, variances or special exceptions for this property?

Yes _____

No _____

If “yes”, please indicate the date thereof and nature of zoning granted:

Signature of Applicant

Signature of Owner

ZHB application

COMMONWEALTH OF PENNSYLVANIA
COUNTY OF _____

The undersigned, being duly sworn according to law, deposes and says that he is the above-named applicant, that he is authorized to execute this affidavit on behalf of the owner and that the facts are true and correct.

Applicant

SWORN TO AND SUBSCRIBED

before me this ____ day
of _____ A.D., 20 ____

Notary Public

Date received _____

Fee received _____

Zoning Officer