TOWAMENCIN TOWNSHIP

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APPLICATION TO THE TOWAMENCIN TOWNSHIP ZONING HEARING BOARD

1. APPLICANT

| A. Name: | E-Mail: | |
|---|------------------------|-----------------|
| B. Address: | | Phone No.: |
| Applicant's interest in property: Legal Owner | Equitable Owner | Tenant |
| Other (specify): | | |
| 2. OWNER | | |
| A. Name: | E-Mail: | |
| B. Address: | | Phone No.: |
| 3. PROPERTY | | |
| A. Address: | | |
| B. Block: Unit: | Parcel No.: | |
| C. Zoning Classification: | | |
| D. Public Water: Yes No | Public Sewer: Yes | No |
| E. Present improvements to property: | | |
| | | |
| F. Present use of property: | | |
| | | |
| G. Proposed improvements to property: | | |
| | | |
| H. Proposed use of property: | | |
| | | |
| I. Previous Zoning Hearing Board action relative to the | his property? Yes No _ | Application No: |
| Nature of zoning relief granted: | | |
| 4. ATTORNEY: | | |
| Representation by legal counsel? Yes No | | |
| Name: | E-Mail: | |
| Address: | | |

A. Appeal of Administrative Official: 1. Name and title of official: 2. Determination: 3. Date of determination: 4. Section of Zoning Ordinance involved: **B.** Special Exception Section of Zoning Ordinance involved: C. Variance 1. Section of Zoning Ordinance involved: D. Validity Challenge 1. Section of Zoning Ordinance involved: 2. Describe basis of challenge: Description of relief sought: Basis of entitlement to Zoning Hearing Board: APPLICATION MUST INCLUDE SUBMISSION OF ALL OF THE FOLLOWING: A. Original and fifteen (15) copies of Zoning Hearing Board Application.. B. Sixteen (16) copies of Site Plan/Plot Plan of the property, accurately drawn to scale and depicting location, dimensions and setbacks, and current and proposed improvements. The Zoning Hearing Board highly recommends that the application include a plan drawn to scale, prepared by a PA licensed engineer or surveyor, particularly when the application concerns the size or location of buildings, other structures, and new improvements. C. Sixteen (16) copies of property deed and proof of equitable ownership if applicable. NOTE: Failure to provide the required fee and all of the requested information and documentation, per the instructions of this form, will result in return of the application. All plans/exhibits to be submitted in evidence at the hearing must be foldable to a size suitable for filing in an 8 ½" x 14" space. I, the undersigned, herewith declare the information stated herein and the additionally submitted documentation to be true and correct facts to the best of my knowledge or information and belief. I understand that false statements are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities. Date: Applicant's Signature: I authorize the applicant as listed above to present this petition on my behalf. Owner's Signature: Date: _____ COSTS INCLUDE APPLICATION FEE PLUS ADVERTISING COSTS FOR OFFICIAL USE ONLY Date Application Received: Application No._____ Fee Amount: Check No. Received By: Escrow Amount: _____ Check No. Signature of Zoning Officer:

APPLICATION FOR: