



HILLTOWN TOWNSHIP

13 West Creamery Road
P.O. Box 260
Hilltown, PA 18927
(215) 453-6000 Fax: (215) 453-1024
www.hilltown.org

APPEAL TO ZONING HEARING BOARD
HILLTOWN TOWNSHIP

*Please note: It is **required** that all applicants make an application for a Subdivision/Land Development and/or apply for a **Zoning Permit** and receive a **review** from the Township prior to submitting an application to the Zoning Hearing Board.*

<u>TOWNSHIP USE:</u> Appeal #: _____ Date Filed: _____ Received By: _____

PLEASE COMPLETE ALL SECTIONS OF THE APPLICATION

PLEASE ATTACH ALL REQUESTED DOCUMENTATION. FAILURE TO COMPLETE ALL SECTIONS OR ATTACH ALL REQUESTED DOCUMENTATION MAY RESULT IN A DENIAL OF YOUR APPLICATION. YOUR INITIALS BELOW INDICATE THAT YOU HAVE A COMPLETE UNDERSTANDING OF THE SAME.

THE TOWNSHIP WILL NOT ACCEPT APPLICATIONS UNLESS INITIALED BELOW.

Date: _____ _____ *Initials*

1. Applicant:
 - a. Name: _____
 - b. Mailing Address: _____

 - c. Phone Number: _____ Email: _____
 - d. State whether the Applicant is: *(Check one or more if applicable)*
 - ___ Owner of Legal Title
 - ___ Owner of Equitable Title
 - ___ Tenant with the Permission of Legal Title
2. Applicant's Attorney: (if any)
 - a. Attorney's and Firm Name: _____
 - b. Mailing Address: _____

 - c. Phone Number: _____ Fax No.: _____
 - d. Email Address: _____

HILLTOWN TOWNSHIP
ZONING AND BUILDING DEPARTMENT

3. Property Information:

- a. Present Zoning Use Classification: _____
- b. Tax Parcel Number: _____
- c. Location: (with reference to nearby intersections or prominent features):

4. Present Use: _____

5. Proposed Use:(if different) _____

6. Classification of Appeal: *(Check one or more if applicable)*

- A. Request for a Variance (Zoning Ordinance §160-104.A)
- B. Request for Special Exception (Zoning Ordinance §160-104.B)
- C. Interpretation of Law
- D. Appeal from action of the Zoning Officer (Attach all related correspondence)
- E. Other (Please specify)

7. Cite Zoning Ordinance sections applicable to, and summarize, relief request:
(use separate paper if necessary)

8. Have any previous appeals been filed regarding this property: _____ Yes _____ No

a. If yes, please explain: _____

b. Prior Appeal Number: _____

I (We) hereby certify that the above information is true and correct to the best of my (our) knowledge, information or belief.

Name: _____ Date: _____

Name: _____ Date: _____

**HILLTOWN TOWNSHIP
ZONING AND BUILDING DEPARTMENT**

The following need to accompany this application:

1. Six (6) copies of the application
2. Six (6) copies of the deed (MUST BE ATTACHED TO APPLICATION)
3. Six (6) copies of the plans (MUST BE ATTACHED TO APPLICATION)
 - a. Commercial Properties: plan(s) must be prepared by a professional engineer or surveyor.
 - b. Residential Applications: The Board will accept any plans which are complete and accurate. If the plan(s) are not prepared by a professional engineer or surveyor, the person who prepared the plan must be ready to state under oath, that the plan(s) are complete and accurate. The plan(s) must contain all the information relevant to the Appeal, including but not limited to the following:
 - The related to a street
 - The dimensions and area of the lot
 - The dimensions and location of existing buildings or improvements
 - The dimensions and locations of proposed uses
 - Building(s) or improvements
4. Six (6) copies of any and all information you feel explains or is supportive of your application
5. Six (6) copies of Zoning Permit Review Letter Denial
6. The required filing fee, (listed below), is not returnable once the Appeal is accepted.

<u>Application to Zoning Hearing Board</u>	<u>FEE</u>
A. Residential Use	\$950.00
B. Residential Development (3 or More Lots)	\$1,500.00
C. Non-Residential Use	\$2,000.00
D. Multiple Hearing-Additional Testimony Only	50 % of Original Fee
E. Court Ordered Remand Hearing	50% of Original Fee
F. Legal Non-Profit Corporation	25% of Non-Residential Use Fee