

#### 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

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

TOWNSHIP USE:			
Appeal #:			
Date Files:			
Receipted By:			

#### PLEASE COMPLETE ALL SECTIONS OF THEAPPLICATION

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

THE TOWNSHIP WILL NOT ACCEPT APPICATIONS UNLESS INTIALED BELOW.

Date:		Initials
1 A	1.	
1. App	blicant:	
	a. Name:	
	b. Mailing Address:	
	c. Phone Number:Email:	
	d. State whether the Applicant is: (Check one or m	ore if applicable)
	<ul><li>Owner of Legal Title</li><li>Owner of Equitable Title</li><li>Tenant with the Permission of Legal</li></ul>	ıl Title
2. App	olicant'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.	Propert	y Information:
	a.	Present Zoning Use Classification:
	b.	Tax Parcel Number:
	c.	Location: (with reference to nearby intersections or prominent features):
4.	Present	Use:
5.	Propos	ed Use:(if different)
6.	Classif	ication 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 Zo	oning Ordinance sections applicable to, and summarize, relief request:  (use separate paper if necessary)
8.		ny previous appeals been filed regarding this property:  Yes No If yes, please explain:
	b.	Prior Appeal Number:
	hereby ation or	certify that the above information is true and correct to the best of my (our) knowledge, 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. <u>Commercial Properties</u>: plan(s) must be prepared by a professional engineer or surveyor.
  - b. <u>Residential Applications</u>: 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. One (1) electronic version (flash drive) of all documents stated 1-5 above including, but not limited to: application, deed, plans, denial letter and any other supportive documentation.
- 7. The required filing fee, (listed below), is not returnable once the Appeal is accepted.

<b>Application to Zoning Hearing Board</b>	<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