

APPLICATION TO THE ZONING HEARING BOARD

MONAGHAN TOWNSHIP

CASE NO.: _____ **MAP/PARCEL:** _____

**Application is made to the Monaghan Township Zoning Hearing Board for:
A Special Exception**

A Variance (please circle one)

An Appeal (Decision of Zoning Officer)

APPLICANT INFORMATION:

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Cell: _____
Email: _____
Applicant's Attorney Name and Address: _____

If applicant is not the owner, owner must also provide consent by signing this application where indicated herein.

PROPERTY OWNER:

Name: _____
Address: _____ City/State/Zip: _____
Phone: _____ Cell: _____
Email: _____

PROPERTY INFORMATION:

Property Address: _____
City/State/Zip: _____
Existing Use: _____
Zoning District: _____
Total property (lot) area (square feet or acres): _____

A copy of a survey or site plan drawn to scale showing the north point, dimensions of the lot, location of the corner stakes or monuments, any water courses or right-of-way, existing and proposed building structures, driveways, parking, landscaping, property lines, etc. MUST BE SUBMITTED WITH APPLICATION.

The names and addresses of the owners of all properties adjoining the subject property (attach a separate sheet if necessary).

- | | |
|----------------------------|----------------------------|
| 1. _____

_____ | 2. _____

_____ |
| 3. _____

_____ | 4. _____

_____ |
| 5. _____

_____ | 6. _____

_____ |

Proposed Use: _____

The specific sections of the Monaghan Township Zoning Ordinance which the application for special exception, variance or appeal is based: _____

Briefly state of the relief sought or the special exception or variance desired: _____

Give a statement of the grounds for the appeal, or of the reasons both in law and in fact for the granting of the special exception or variance, including a description of the use of neighboring properties where pertinent. In cases of appeal, the specifications or error shall state separately the applicant's objections to the actions of the administrative officer with respect to each question of law and fact which is sought to be reviewed.

Attach a true copy of the order, requirement, decision or determination of the Zoning Officer.

Reason(s) the request should be granted.

In case of a Variance, the unnecessary hardship on the property is (circle all that apply):

Due to unique physical circumstances of the property in question;

Not financial in nature;

Not self-created.

Will the proposed Variance alter the essential character of the neighborhood or impair the use of adjacent property. _____YES _____NO

If yes, describe: _____

Applicant's Signature

Date

Applicant's Signature

Date

(For Office Use Only)

FOR OFFICE USE ONLY – APPLICATION SUBMITTAL CHECKLIST

Date Received _____ Fees Paid _____

Map and Parcel _____ Existing Zoning District _____

(For Office Use Only)

FOR OFFICE USE ONLY – APPLICATION SUBMITTAL CHECKLIST

Date Received _____ Fees Paid _____
Map and Parcel _____ Existing Zoning District _____

Date Application Accepted as Complete _____

Dates Advertised _____

Property Posted _____

Adjacent Property Owners _____

Adjacent Property Owners Notified _____

ZHB Members Notified _____

PC Members Notified (if applicable) _____

If applicable, Planning Commission Hearing Date and Recommendation _____

Date of ZHB Hearing _____ Date of Decision _____

Decision _____

Conditions of Approval _____

Zoning Officer