CASTANEA TOWNSHIP APPLICATION FOR ZONING HEARING

I: PROPERTY OWNER: Name: Phone: City: _____ Zip: _____ II: IDENTIFICATION – To be completed by all applicants (use additional paper if necessary) Name: Phone: Applicant: Address: City: _____ Zip: _____ Name: _____ Phone: _____ Applicant's Attorney (if any) Address: City: _____ Zip: _____ Equitable Owner Tenant with Permission Owner (written proof of status shall be provided at the time of hearing) CLASSIFICATION OF REQUEST (Check all that are applicable and complete corresponding III: section below using additional pages if necessary) Appeal from Zoning Officer's Decision _____ Request for Special Exception Certification of Nonconforming Use/Lot _____Request for Variance Challenge to the Validity of Zoning Ordinance or Map Extension of Time for Previously Granted Relief _____ Other (specify) _____

V: PROPERTY DESCRIPTION Lot Size: _____ Lot Prontage: _____ Lot Depth: _____ Description of <u>current</u> use of property: Description of <u>existing</u> improvements of property: Description of proposed use and proposed improvements of property: VI: **ORDINANCE** State each section of the Township Zoning Ordinance that is involved in this application and specific interpretation or relief requested from the section: VII: VARIANCE – SECTION OF ORDINANCE State the specific hardship claimed and reasons why a variance should be granted: VIII: SPECIAL EXCEPTION – SECTION OF ORDINANCE _____ State the specific reasons why the applicant is entitled to the special exception:

IX: APPEAL FROM ZONING OFFICER DECISION State the date of the Zoning Officer's decision and the specific reasons for the appeal and the relief CERTIFICATION OF NONCONFORMING USE / CHALLENGE TO VALIDITY / X: **EXTENSION OF TIME** State the particular relief requested and the reasons for the requested relief: XI: PREVIOUS APPEAL Has any previous appeal or application been filed in connection with this property? XII: **SIGNATURE** The Applicant hereby deposes and says that all of the above statements contained in this application are true and correct to the best of their knowledge and belief. I hereby certify that the proposed application is authorized by the owner of the record and that I have been authorized by the owner to make this application as his agent and we agree to conform to all applicable laws of Castanea Township.

Signature of Applicant

Date