

**UPPER PROVIDENCE TOWNSHIP, DELAWARE COUNTY
ZONING HEARING BOARD
APPLICATION FOR VARIANCE**

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(MUST BE SUBMITTED AT LEAST 30 DAYS PRIOR TO THE HEARING)

PLEASE NOTE THAT THE APPLICANT MUST SCHEDULE AN APPOINTMENT WITH THE ZONING OFFICER PRIOR TO SUBMITTING THE APPLICATION

APPLICATION INFORMATION:

Name: _____

Address: _____

Phone _____

Email

PROPERTY INFORMATION

Address: _____

Folio #: _____

Map Page/Parcel: _____

Property was acquired on or before the _____ day of _____, 20_____
Property is zoned: _____ Current use is: _____ Proposed Use: _____

Attach to this application the following documents:

Proof of ownership* _____ Property Deed _____ 9 copies of site plan** _____

Deed may be used as proof of ownership and a copy of the agreement of sale should be provided for equitable owners to be recognized as petitioner

****Site plan should be drawn to scale and show "existing conditions" as well as proposed conditions****

Applicant petitions the Board for a variance from the following section(s) of the Zoning Code:

Chapter: _____ Section: _____ Subsection: _____

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Variance(s) sought are as follows:

Petitioner requests that the Zoning Hearing Board of Upper Providence Township set a day and time for a public hearing on this petition so that the Petitioner and others may be heard for or against the granting of this petition in accordance with the Upper Providence Township Code.

I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief.

Petitioner(s) signature: _____

Sworn to and Subscribed
Before me this _____ day
of _____, 20_____
My commission expires _____

_____ Notary Public signature

-----FOR OFFICE USE ONLY-----

Date Received: _____ Fee: _____ Escrow: _____ Rec'd By: _____

Check #: _____ Check #: _____

Rec'd From: _____