

Greene Township

Zoning Hearing Board Application

This request must be submitted by the applicant to our office with the appropriate information and \$1200 fee, payable to Greene Twp.

Mail to:

Light-Heigel & Associates

Kyle L. Kehoe, Zoning Officer

135 Walter Drive Suite 3

Lewisburg, PA 17837

THIS SECTION - STAFF USE ONLY

Case Number:

Dates Advertised:

Date Received:

Date Property Posted:

Date Hearing Scheduled:

Date Notifications Mailed:

Payment Received Amount:

Check Number:

1. Type of Request

- ☐ Use Variance ☐ Dimensional Variance ☐ Special Exception
☐ Appeal of Decision of Zoning Officer ☐ Other

Please Explain:

2. Subject Property

Assessor's Parcel Number(s)

Zoning District

Property Address or Site Location

Municipality

Lot Area (square feet)

Lot Width (feet)

Lot Depth (feet)

Name of Business or Establishment (If Applicable):

3. Prior ZHB Action

List any and all prior Zoning Hearing Board action regarding the property. List the date, permit number issued if applicable and the nature of the zoning relief granted.

For Questions 4 – 10: Attach additional page(s) if necessary. See Instructions/Checklist.

4. Present Use

Describe the present use of the property (i.e. residential, retail, office, etc) including existing improvements on it (i.e. house, garage, shed; or office and parking lot)

5. Proposed Use

Is the proposed use non-residential? Yes No

☐☐

If Yes, additional Application Requirements must be submitted. See the Application Checklist.

Describe the proposed improvements, additions, or change of use. For physical changes to the lot or structures, indicate the size of proposed improvements.

6. Relief Requested

State the variance, special exception, or other relief requested and cite the appropriate section(s) of the Zoning Ordinance. Explain why the relief requested represents the minimum relief necessary for the reasonable use of the property.

7. Physical Characteristics Creating Hardship

For any request for a variance, describe the physical (non-economic) circumstances or conditions (i.e. irregular lot size) peculiar to the property that require zoning relief to enable reasonable use of the property. If a variance is not being requested, write "N/A".

8. Consistency with Surrounding Neighborhood

Describe how the proposed change/use will/will not alter the essential character of the neighborhood? Explain.

9. Suitability for Use

For any new or expanded use, describe how the property is suitable for the use desired. If the use of the property is not changing, write "N/A".

10. Impact on Traffic or Parking

For any special exception request, describe how the proposed change will/will not impact traffic or parking in the surrounding area? Explain. If applying for a variance, write "N/A".

11. Property Owner(s) *If different from applicant*

If the applicant is not the landowner of record, information must be presented (i.e. agreement of sale or lease), to demonstrate that the applicant has the legal right to make the application

Name:		Phone:
Address:		Fax:
City/State:	ZIP:	Email:

12. Applicant

Name:		Phone:
Address:		Fax:
City/State:	ZIP:	Email:

13. Applicant's Attorney *If the applicant intends to be represented by Legal Counsel*

Name:		Phone:
Address:		Fax:
City/State:	ZIP:	Email:

14. Owner / Applicant Certification *If the applicant and property owners are different, both must sign the application*

By my signature below, I hereby certify the following:

1. I understand that it is the responsibility of the applicant to substantiate the request being made
2. I understand there is no guarantee - expressed or implied - that any request will be granted. I understand that each matter must be carefully evaluated by the Zoning Hearing Board during public hearing(s) as prescribed to in the Greene Township Ordinance and Pennsylvania Municipalities Planning Code.
3. I understand that planning staff is not permitted to assist the applicant or opponents of the project in preparing arguments for or against a request.
4. I understand that if my application is denied, there is no refund of fees paid.
5. I understand that submitting inaccurate or incomplete information may result in delays or denial of my application.
6. I certify that the information provided in this application, including attachments, is accurate and correct to the best of my knowledge.
7. I have read and understand the foregoing, and agree to the submittal of this application.

Signature (Blue Ink):	Date:
Print Name:	Check One: ☐ Property Owner ☐ Applicant
Signature (Blue Ink):	Date:
Print Name:	Check One: ☐ Property Owner ☐ Applicant