

Application for Hearing Before the Zoning Hearing Board

This request must be submitted by the applicant to our office with the appropriate information and fee.

Schuylkill County Planning and Zoning
401 N Second Street
Pottsville PA 17901
Phone: 570.628.1415
Business Hours: 8:30 AM to 4:30 PM
www.schuylkill.us



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 Schuylkill County Zoning 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: <input type="checkbox"/> Property Owner <input type="checkbox"/> Applicant
Signature (Blue Ink):	Date:
Print Name:	Check One: <input type="checkbox"/> Property Owner <input type="checkbox"/> Applicant