



260 Lewis Road
West Grove, PA 19390
(o) 610-869-9620 • (f) 610-869-9194
office@penntownship.us

Variance Use Application ZHB

• For special exception, variance or appeal •

This application form must be completed and submitted, along with the appropriate payment and attachments, to the Penn Township Secretary, so a hearing may be scheduled. In addition to their original the applicant should turn in seven (7) copies of the completed application and seven (7) copies of any and all plans, as well as an electronic copy of both the application and plans. Please include Applicant's Deed, Lease and/ or agreement of sale.

This application is made in accordance the Penn Township Zoning Ordinance.

TYPE OF ACTION REQUESTED:

- ☐ Request got special exception (Zoning Hearing Board)
- ☐ Request for variance (Zoning Hearing Board)
- ☐ Appeal from the decision of the Board of Supervisors (Zoning Hearing Board)

TOWNSHIP USE ONLY:

Application #: _____
Date of Application: _____
Date of Hearing: _____
Amount Paid: \$ _____

APPLICANT

Name _____

Address _____

Phone(s) _____

Email _____

Relationship to Owner _____

ATTORNEY

Name _____

Address _____

Phone(s) _____

Email _____

OWNER(S)

Name _____

Address _____

Phone(s) _____

Email _____

ATTORNEY

Name _____

Address _____

Phone(s) _____

Email _____

Nature of this Application

This proceeding is based on the Penn Township Zoning Ordinance

No. _____ Section(s) _____

Interest of Applicant/Appellant in Property: _____

Statement of Relief Sought/Reason for Application of Appeal: _____

Additional Comments: _____

The following items are attached here to for Penn Township.

(Please note: in addition to the original copy of the application and plan an additional five (5) copies must be turned into the Penn Township office for the application to be considered complete.)

- ☐ Copies of the Deed to the premises described herein.
- ☐ Copies of the legal description of the premises described herein if different from the Deed description in any way.
- ☐ Copies of the site plan, plot plan or survey depicting the entire property affected by the application, the existing buildings, improvements and structures located on such property, and proposed changes or additions to the existing buildings, improvements or structures located on such property and any new buildings, improvements or structures proposed to be constructed or erection such property.
- ☐ A copy of the original application (if any) made to the Zoning Officer.
- ☐ Copies of the order or decision appealed form.

I understand that the Penn Township Board of Supervisors shall have the right to asses any additional costs incurred by this application or appeal. ¹

Applicant Signature

Date

¹ - The hearing costs, initial and additional, are subject to certain limitations under Pennsylvania law.

Property Information

Address _____

Tax Assessment Number _____ Zoning District _____

Date Acquired _____ Total Area of Lot _____

Present Use(s) _____

Proposed Use(s) _____

Dimensions of Lot _____

Descriptions of Existing Buildings and Structures _____

Proposed Construction

Building Dimensions: Height _____ Width _____ Depth _____

Square Feet: First Floor _____ Second Floor _____ Additional _____

Total Impervious Coverage after Construction _____

Proposed Building Setback: Front _____ Rear _____

Side _____ Side _____

Type of Construction Proposed _____

Estimated Cost: \$ _____

Contractor

Name _____

Address _____

Email _____

Phone _____

Fax _____

Architect

Name _____

Address _____

Email _____

Phone _____

Fax _____

COMMONWEALTH OF PENNSYLVANIA:

SS.

COUNTY OF CHESTER:

_____, being duly sworn according to law, deposes and says that he/she is authorized to make the Affidavit on the Applicant's behalf, and that the facts set forth herein are true and correct to the best of his/her knowledge, information and belief.

Signature

Print Name and Title

Sworn to and subscribed before me this _____ day of _____, 20_____.

_____ (SEAL)
Notary Public