

**HOPEWELL TOWNSHIP  
20 PARKVIEW ROAD  
AVELLA, PA 15312  
724-345-3333**

**APPLICATION FOR A VARIANCE**

1. Name of Property Owner: \_\_\_\_\_
2. Address of Property Owner: \_\_\_\_\_
3. Telephone Number of Property Owner: \_\_\_\_\_
4. Email Address of Property Owner: \_\_\_\_\_

COMPLETE QUESTIONS #5 - #9 ONLY IF APPLICANT IS DIFFERENT FROM PROPERTY OWNER

5. Name of Applicant: \_\_\_\_\_
6. Interest of Applicant: \_\_\_\_\_
7. Address of Applicant: \_\_\_\_\_
8. Telephone Number of Applicant: \_\_\_\_\_
9. Email Address of Applicant: \_\_\_\_\_
10. Address of Property Affected: \_\_\_\_\_
11. Parcel ID #: \_\_\_\_\_
12. Present Use: \_\_\_\_\_
13. Zoning District: \_\_\_\_\_
14. State the nature of the Variance which is sought: \_\_\_\_\_

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15. State the Section of the Township Zoning ordinance from which the Variance is being requested and the conditions under which the Variance is requested:

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16. State all the ground why Applicant believes the requested Variance should be granted. If any hardships are claimed due to topography, layout, etc. of the land in question, state the hardship claimed.

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17. The following information shall accompany this application, as applicable:

- a. A map showing the lot in question drawn to scale, indicating the lot size and showing all dimensions of lot lines and the exact location(s) on the lot of all proposed buildings and structures and alterations to buildings and structures. Indicate zoning district; if in more than one district place the district line on the map.
- b. A statement indicating the use, height, length, width and proportion of the total lot area covered by all proposed and-or existing buildings, structures, or additions, or alterations to a building.
- c. A statement indicating the number of families and/or commercial or industrial establishments to be accommodated within existing and proposed buildings on the lot. in the case of commercial and industrial uses and home occupations, indicate the floor area to be devoted to each use.
- d. The number, location and design of parking and loading areas, recreation areas, signs, buffer yards and landscaping, means of ingress and egress to the lot, routes for pedestrian and vehicular traffic, and outdoor lighting throughout the tract.

18. This application is not complete until the fee established for such applications by resolution of the Board of Supervisors has been paid by Applicant and all information required by this application has been furnished. In making this application, the Applicant agrees to pay all fees required by the fee schedule adopted by the Board of Supervisors by ordinance or resolution in effect on the date of the application.

Following are the names and addresses of owners of property within a distance of 300 feet from the exterior limits of the property involved in this matter as shown by the latest assessment roll of the County of Washington.

NAME	ADDRESS
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

By signing this Application, I, the Applicant, do hereby verify that I have reviewed and understand the statements made in this Application and that all such statements are true and correct to the best of my knowledge, information and belief. These statements are being given by me to induce official action on the part of the Hopewell Township Zoning Hearing Board, and I understand that any false statements made herein are being made subject to the penalties of 17 Pa. C.S. §4904 relating to unsworn falsifications to authorities.

Date:

\_\_\_\_\_  
(Signature of Applicant)

(If the application is being made by a person other than the property owner, attach a written authorization from the owner authorizing the application and designating you as his agent.)

DO NOT WRITE IN THIS SPACE. FOR OFFICE USE ONLY.	
Zoning Application Submitted:	Date(s) Hearing Advertised:
_____	_____
Fee Paid - Receipt No.	Hearing Date:
_____	_____

HOPEWELL TOWNSHIP