

Township of Upper Providence

Application to Zoning Hearing Board

Township of Upper Providence
1286 Black Rock Road Phoenixville PA 19460
Phone: 610-933-9179; Fax: 610-983-0355

To be completed by Township staff:

DATE APPLICATION RECEIVED: _____

DATE APPLICATION ACCEPTED: _____

APPLICATION NUMBER: _____

TOWNSHIP RECEIVED SIGNATURE: _____

FEE PAID: _____

Date Submitted to the Township of Upper Providence: _____

[1.] Classification of Application (check one or more as applicable):

- _____ [A.] Request for **VARIANCE** [Pennsylvania Municipality Planning Code (PA MPC), Sections 909.1(a)(5) and 910.2]
- _____ [B.] Request for **SPECIAL EXCEPTION** [PA MPC, Sections 909.1(a)(6) and 912.1]
- _____ [C.] **APPEAL** of determination of the Zoning Officer, Township Engineer, or other Township officer or agency [PA MPC, Sections 909.1.(a)(3), (4), (7) and (8)]
- _____ [D.] **SUBSTANTIVE CHALLENGE TO THE VALIDITY** of the Zoning Ordinance or Map (i) by a landowner regarding the prohibition or restriction on the use or development of landowner's land, or (ii) by a person aggrieved by the use or development permitted on land of another [PA MPC, Sections 909.1.(a)(1), 916.1.(a), and 916.1.(b)]

[2.] Property Address:

- [A.] Number and Street (if assigned pursuant to Township Ord. No. 179, June 28, 1976, as amended): _____
- [B.] Tax Parcel Number(s): _____
- [C.] Block / Unit: _____
- [E.] Nearest Cross Street: _____
- [D.] Current Zoning: _____
- [F.] Area (acreage or square feet): _____

[3.] Describe the size, construction and use of the existing improvements or use of land, if unimproved:

[4.] Applicant: _____

[5.] Owner: _____

[A.] Applicant Address: _____

[A.] Owner Address: _____

[B.] City/State/Zip: _____

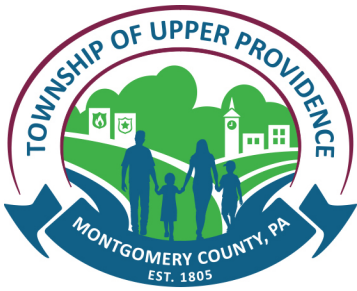
[B.] City/State/Zip: _____

[C.] Applicant phone/email: _____

[A.] Owner phone/email: _____

[6.] Classification of Applicant (check one or more as applicable):

- _____ [A.] Owner of Legal Title – Copy of Deed must be attached as Exhibit
- _____ [B.] Owner of Equitable Title – Agreement of Sale must be attached as Exhibit
- _____ [C.] Tenant with the permission of the Owner of Legal Title – Lease must be attached as Exhibit
- _____ [D.] Other (please describe): _____



Township of Upper Providence

Application to Zoning Hearing Board

APPLICATION NUMBER: _____

[7.] Applicant Representatives:

[A.] Attorney: _____

[i.] Contact Information (phone/email): _____

[C.] Civil Engineer: _____

[i.] Contact Information (phone/email): _____

[B.] Traffic Engineer: _____

[i.] Contact Information (phone/email): _____

[D.] Other: _____

[i.] Contact Information (phone/email): _____

[8.] Plans to be submitted with the application:

Please note: The Township may request additional copies to be provided during the application review process or hearing; all additional copies will be provided at the Applicant's expense.

_____ Plans [four (4) paper copies are required] (dated: _____)

_____ Electronic version of all plan and documentation submitted with application (via CD, thumb drive, etc.)

_____ Dropbox or other electronic file transfers to be sent to ggrace@uprov-montco.org

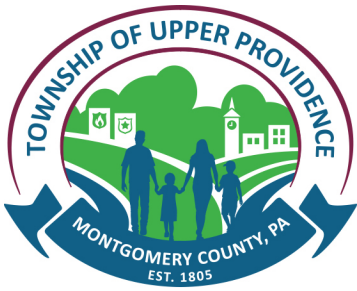
_____ Other Documents [four (4) copies required]

List additional documents by title (attach a separate sheet if necessary):

[9.] Other Required Information (please note if responses are submitted as a separate document):

[A.] Describe the proposed use or construction: _____

[B.] Describe how the proposed use or construction differs from what is permitted:



Township of Upper Providence

Application to Zoning Hearing Board

APPLICATION NUMBER: _____

[C.] List specific Zoning Ordinance sections from or under which a variance, special exception or other relief is being requested:

[D.] State grounds for the relief requested (including, the unnecessary hardship claimed in the case of a requested variance), and cite specific sections of the Pennsylvania Municipalities Planning Code, Zoning Ordinance, Subdivision and Land Development Ordinance, or other acts or ordinances which support the requested relief: _____

[E.] Has a previous application been filed with the Zoning Hearing Board concerning the subject matter of this application?

Yes _____ No _____ If yes, please specify: _____

[F.] Validity Challenges. If 1.D is checked on page 1 of this application, list requested issues of fact or interpretation:

[10.] Applicant's Signature:

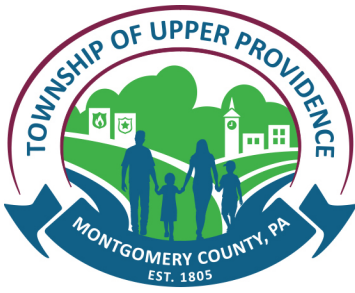
No application shall be accepted for processing unless properly signed in the appropriate space:

[A.] Signed: _____ Owner of Record

[B.] Signed: _____ Equitable Owner

[C.] Signed: _____ Authorized Agent (for: _____ Owner; _____ Equitable Owner)

[D.] Signed: _____ Tenant / Other



1286 Black Rock Road
Phoenixville, PA 19460
Phone: 610-933-9179
Fax: 610-983-0355

Visit Us Online:
www.uprov-montco.org

General Inquiries:
admin@uprov-montco.org

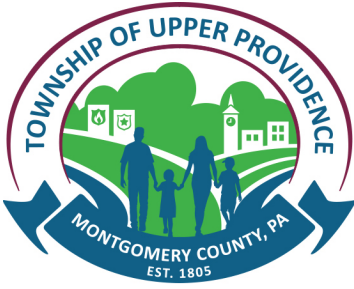
Instruction for Application to the Zoning Hearing Board

- 1) Complete all phases of application and submit with four (4) copies.
- 2) For Section #1(A), (B), or (C), four (4) copies of the plan or plans must be attached to the Application.

The plan(s) should be prepared by a professional engineer or surveyor, but the Board will accept any plan(s) which are complete and accurate, provided that if not prepared by a professional engineer or surveyor, the person who prepared the plan(s) must be prepared to state under oath at the formal hearing that the plan(s) is/are complete and accurate.

The plan(s) must contain all information relevant to the Appeal, including but not limited to, the following: the property related to a street; the dimensions and area of the lot; the dimensions and location of existing buildings or improvements; the dimensions and locations of proposed uses, building or improvements.

- 3) For Section #2(D), four (4) copies of the challenged Ordinance, Ordinance Section or Map must be attached to the Appeal.
- 4) The application must be signed by all applicants in Section #10; the term, "applicant" includes the owner of record and the individual or entity claiming to have an equitable interest in the premises.
- 5) The person presenting the application before the Zoning Hearing Board must be one of the following:
 - a. Legal owner of the property
 - b. Equitable owner of the property
 - c. An attorney who is a member of the Pennsylvania Bar
- 6) Documentation, whether it be a copy of the deed, agreement of sale, lease, or any other agreement confirming and describing the specific interest of the individual signing the application, should be attached to the application as Exhibit "A".



1286 Black Rock Road
Phoenixville, PA 19460
Phone: 610-933-9179
Fax: 610-983-0355

Visit Us Online:
www.uprov-montco.org

General Inquiries:
admin@uprov-montco.org

7) Filing fees (as of the most recent adopted Township Fee Schedule) which must accompany this Appeal, and which are not returnable once the Appeal is accepted, are:

- a. Residential \$ 500.00 plus \$ 50.00 per unit in excess of one (1) unit *
- b. Non-residential \$ 2,000.00
- c. Challenges to the Validity \$ 2,500.00 of the Zoning Ordinance
- d. Sign Appeals \$ 1,000.00

* Applicant will be required to pay any expenses incurred by the Township over and above these amounts.

If the applicant hereafter files an Appeal, or desires a transcript for any reason, he shall be liable for and deposit with the Township forthwith the Court Reporter's estimated charges for an original and two (2) copies of such transcript. If the actual charges differ from the estimate, the Township shall bill or make a refund to the applicant, as appropriate.

8) Any building permit or any other permits to which applicant may be entitled as a result of a decision of the Zoning Hearing Board shall be applied for within six (6) months of the date thereof. Failure to do so will render the decision null and void.

9) All checks shall be made payable to the order of UPPER PROVIDENCE TOWNSHIP and must be submitted with the application.