

**TOWNSHIP OF WEST BRADFORD
ZONING HEARING BOARD APPLICATION**

Property Owner: _____ **Telephone #** _____

Address: _____

Applicant: _____ **Telephone #** _____
(If different from owner – Attach proof of your legal ability to file this application.)

Address: _____

Tax Parcel #: _____

Location of property for which this application is made; if different from above:

(Road or Street)

Zoning district in which the property is located: _____

Lot size – acreage: _____ **Present use:** _____

Purpose of this application (check appropriate section(s):

To obtain a Variance from the Zoning Ordinance Section _____

To obtain a Special Exception, as required by Section _____

To appeal the decision of the Zoning Officer.

Other (must fill in the type of appeal) _____

This section is to be completed if you are requesting a variance from the Zoning Ordinance.

Under Section 910.2 of the PA Municipalities Planning Code and Section 1005.4 of the Township of West Bradford Zoning Ordinance, no variance shall be granted until the applicant has established and the Board has made all of the following findings, as listed below, where relevant in a given case:

[] Unnecessary hardship due to unique physical circumstances.

1005.4.A That there are unique physical circumstances or conditions, including irregularity, narrowness, or shallowness of lot size or shape, or exceptional topographical or other physical conditions peculiar to the particular property and that the unnecessary hardship is due to such conditions and not the circumstances or conditions generally created by the provisions of the Zoning Ordinance in the neighborhood or district in which the property is located.

[] Unique physical circumstances hinder property development.

1005.4.B That because of such physical circumstances or conditions, there is no possibility that the property can be developed in strict conformity with the provisions of the Zoning Ordinance and that the authorization of a variance is therefore necessary to enable the reasonable use of the property.

[] Unnecessary hardship not created by appellant.

1005.4.C That such unnecessary hardship has not been created by the appellant.

[] Character of the neighborhood will not change.

1005.4.D That the variance, if authorized, will not alter the essential character of the neighborhood or district in which the property is located, nor substantially or permanently impair the appropriate use or development of adjacent property, nor be detrimental to the public welfare.

[] Appeal represents the least modification possible.

1005.4.E That the variance, if authorized, will represent the minimum variance that will afford relief and will represent the least modification possible of the regulation in issue.

Describe the general nature of the application and the relief that is sought from the Zoning Hearing Board (example: In order to build a two car garage, as an accessory to a residential use, I request a variance to encroach the side yard setback requirement by three feet.)

The applicant must submit in triplicate, an accurate plan of the lot or property drawn to scale, showing the dimensions of the lot, location of corner stakes or monuments, the setback or restriction lines, the area of the lot in square feet, any water courses or right-of-way which may extend through the property, adjoining property owners, and any existing improvements and/or proposed improvements. The plan shall be dated and signed by a registered engineer or land surveyor, unless waived by the Township Manager.

The applicant must submit three copies of the deed for the property in question. If equitable owner please provide proof and/or authority to act on behalf of the owner.

If a challenge to the Zoning Ordinance is filed, a statement must be included that would reasonably inform the Board of the matters at issue and the grounds for the challenge.

If an appeal of the decision of the Zoning Officer is filed, attach a copy of that order, requirement, decision or determination.

Applications shall not be deemed complete unless accompanied by the appropriate filing fee.

Signature (1) _____

(Print Name) _____

Signature (2) _____

(Print Name) _____

(Please note that all listed applicants must sign application.)

If you wish notice to be sent to legal counsel, include the name, address and telephone number of that person here.

DO NOT FILL IN BELOW THIS LINE – FOR TOWNSHIP USE ONLY

Date Received: _____

File # _____

By Whom: _____

Fee Received: _____