

SKIPPACK TOWNSHIP
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4089 Heckler Road - P.O. Box 164
Skippack, PA 19464
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SKIPPACK TOWNSHIP ZONING HEARING BOARD APPLICATION **APPEAL NO.** _____

TO BE COMPLETED BY SKIPPACK TOWNSHIP ONLY:

APPEAL NO. _____ DATE FILED: _____ TIME: _____

**APPEAL TO THE ZONING HEARING BOARD
SKIPPACK TOWNSHIP
MONTGOMERY COUNTY, PENNSYLVANIA**

1. **Date:** _____

2. **Classification of Appeal (check one or more if applicable)**

- _____ A. Request for Variance (Zoning Code, 200-78)
- _____ B. Request for Special Exception (Zoning Code, 200-167)
- _____ C. Appeal from the Zoning Officer (Zoning Code, 200-135 to 143)
- _____ D. Challenge Validity of Zoning Ordinance or Map
(Zoning Code, 200-176)
- _____ E. Challenge to the Subdivision and Land Development Ordinance
(Chapter 169, SALDO)

3. **Applicant:**

Name of Applicant: _____

Mailing Address: _____

Parcel No: _____ Email: _____

Telephone Number: _____ Fax: _____

When did the owner of property take title to it? _____

4. **Applicant's Attorney (if any):**

Name of Attorney: _____ Email: _____

Name of Firm: _____

Mailing Address: _____

Telephone Number: _____ Fax: _____

5. **Property:** Present Zoning Classification: _____

Location: _____

Nearest Intersection or Prominent Features: _____

a. State the exact dimensions of the property:

Lot Area: _____ Frontage: _____ Depth: _____

b. State the exact dimensions and uses of all buildings on the property:

6. What is the present use of the property:

7. What use do you propose for the property:

8. Has the property ever been used for the same use you propose in Q7? _____ If so, please state when the proposed use was first present on the property: _____

9. Do you contend that your proposed use is a legal non-conforming use: _____ If so, state when the proposed use was first present on the property: _____

10. How much off-street parking is available on the property at the present time: _____ How much additional off-street parking do you propose:

11. Is the property subject to an agreement of sale conditioned upon you receiving the zoning relief you request: _____

12. State why you were refused a permit and what articles or sections of the Zoning Code are infringed: _____

13. State what hardship you will suffer if you do not receive the requested relief:

14. State what relief you request from the Zoning Code provisions you are infringing (See Zoning Codes online): _____

15. State why the requested relief is in the public interest: _____

16. Have there been any other Zoning Hearings for this property: _____ If so, please list dates and relief granted: _____

I/We hereby certify that the information is true and correct to the best of my/our knowledge, information, or belief.

PLANS:

Please submit ten (10) copies (also include renderings) with your application. In addition, please submit an electronic copy to dciliberto@skippacktownship.org. A professional engineer or surveyor should prepare the plan(s), but it is not required.

FEES:

Fees that accompany this Appeal/Application are **non-refundable**. This fee pays the compensation of the members of the Zoning Hearing Board, the legal Notice, and administrative costs for the initial hearing.

Variances

Residential	\$500.00
Non-Residential	\$750.00

Special Exceptions

Residential (Article XII §200-151.B. ONLY)	\$250.00
Non-Residential (Article XII § 200-151.B. ONLY)	\$375.00
All Other Residential Special Exceptions:	\$500.00
All Other Non-Residential Special Exceptions:	\$750.00

Challenges

\$1,000

Continuance Fee

50% of Original Fee Paid Prior to Hearing
Hearing continued for additional applicant testimony.