

APPLICATION TO MONTOUR COUNTY ZONING HEARING BOARD

Montour County, PA

Date: \_\_\_\_\_ Number: \_\_\_\_\_

TYPE OF ACTION REQUIRED: Variance \_\_\_\_\_ Special Exception \_\_\_\_\_  
Appeal \_\_\_\_\_

1. The name and address of Applicant are: \_\_\_\_\_  
\_\_\_\_\_
2. The name and address of Applicant's attorney are: \_\_\_\_\_  
\_\_\_\_\_
3. The interest of Applicant is: \_\_\_\_\_  
\_\_\_\_\_
4. If interest is other than "owner", furnish name and address of  
owner: \_\_\_\_\_
5. The subject property is described, located, and used as follows  
(if necessary, attach map or sketch) : \_\_\_\_\_  
\_\_\_\_\_
6. The special exception, appeal or variance sought by Applicant, citing the  
present zoning classification of property and the section of the Zoning  
Ordinance under which the special exception, appeal or variance is requested:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. The grounds for appeal, special exception or variance are: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
8. Attach a copy of the "APPLICATION for ZONING PERMIT".

\_\_\_\_\_  
Signature of Applicant

DATES	Fee: <del>\$300.00</del> <sup>400.00</sup>	Received: _____
Received: _____	Notices: _____	
Publication: _____	Referred to Plng. Comm. _____	
Hearing: _____	Plng. Comm. Action: _____	
Order: _____	_____	

A. APPLICATION APPROVED YES \_\_\_\_\_ NO \_\_\_\_\_ DATE: \_\_\_\_\_ CHM: \_\_\_\_\_

B. Conditions Imposed by Board for Denial: \_\_\_\_\_