

Date Hearing Advertised _____ Application/Appeal No. _____

Fee Paid- Receipt No. _____ Date of Application/Appeal _____

ZONING HEARING BOARD MUNICIPALITY OF MONROEVILLE

APPLICATION/NOTICE OF APPEAL

1. Name of Applicant/Appellant: _____
Address: _____
Phone: _____

Indicate below the nature of the Application / Appeal

A. Hereby appeals from the decision of the Zoning officer of (Date): _____
Regarding: _____

B. Hereby applies for () a variance, () special exception, () certificate of non-conformity, () other
Zoning Ordinance Section: _____

C. Explain details regarding above: _____

2. The Owner of the real estate involved in the Application/Appeal is:
Name: _____
Address: _____
Phone: _____

3. The location of the real estate involved in this Application/Appeal is:
Address or _____
Other Description: _____

4. The present Zoning Classification of real estate in question is: _____
and at present, it is used for the purpose of: _____

5. The Applicant/Appellant claims that the variance or special exception or other relief herein requested may be allowed under the Zoning Ordinance, Section: _____

6. The new improvements or additions to old improvement desired to be made are as follows (fill in where applicable):

A. Buildings /Structures to be built: _____

B. Buildings / Structures to be changed: _____

C. To be used for the purpose of: _____

7. Attached hereto is a Plot Plan of the real estate affected, indicating the location and size of the lot, and size of improvements now erected and proposed to be erected thereon. (The Plot Plan must be submitted with the Application/Appeal).

8. The Applicant/Appellant believes that the variance or special exception or certificate of non-conformity or other relief should be granted for the following reasons (explain hardship as it relates to the real estate if the request is for a variance):

9. The following are the names and addresses of the owners of real estate within a distance of 300 feet from the exterior limits of the real estate involved in this Application / Appeal as shown by the latest assessment roll of Allegheny County:

Name

Address

10. Have any previous development plans or Applications / Appeals been filed with the Municipality or the Zoning Hearing Board or Planning Commission or Planning Department in connection with the real estate in question, and if so, indicate the date and Municipal file numbers:

11. State the Applicant / Appellant's interest in the real estate in question, if any, (owner, agent, lessee, etc.):

I verify that the statements made in this Application / Appeal are true and correct. I understand that false statement herein are made subject to the penalties of 18 Pa. C.S. S4904 relating to unsworn falsification to authorities.

Application Prepared by:

Signature of Applicant

Date