

**CONESTOGA TOWNSHIP**

3959 MAIN STREET  
CONESTOGA PA 17516

**APPLICATION FOR  
ZONING HEARING BOARD**

Request for:

Variance \_\_\_\_\_ Special Exception \_\_\_\_\_ Appeal of Decision \_\_\_\_\_

As per Section \_\_\_\_\_ of the Conestoga Township Zoning Ordinance

1. Location of Property: \_\_\_\_\_  
\_\_\_\_\_

Zoning District: \_\_\_\_\_

2. Applicant's Name: \_\_\_\_\_

3. Applicant's Address: \_\_\_\_\_  
\_\_\_\_\_

4. Applicant's Telephone: (day) \_\_\_\_\_ (evening) \_\_\_\_\_

If the applicant is not the owner of the property, please provide the following information regarding the owner with the owner's signature signifying that the applicant has an equitable interest in the property and the owner's authorization to file this application with Conestoga Township.

5. Owner's Name: \_\_\_\_\_

6. Owner's Address: \_\_\_\_\_

7. Owner's Signature \_\_\_\_\_

8. Explain purpose of requesting hearing: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Please read and acknowledge the following:

For Special Exception and Conditional Use Requests:  
I have read Section 1709 of the Conestoga Township Zoning Ordinance and understand what is required to submit a complete application.

For Variance Requests:  
I have read Section 1704.F through 1704.I of the Conestoga Township Zoning Ordinance and understand what is required to submit a complete application, the findings governing the Zoning Hearing Board's approval of a variance, the conditions imposed on variances and the expiration of variances.

I hereby submit this application and all supporting documentation (10 copies of all documents larger than 8½" x 11") with the filing fee of \$500.00 and understand that I have no right to expect a hearing to be scheduled until the fee is paid and all necessary documentation required by the Conestoga Township Zoning Ordinance has been submitted. I verify that all the statements made in the forgoing are true and correct and that false statements may subject me to the penalties of 18 Pa C.S. Section 4904.

APPLICANT'S SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_