

**EAST HANOVER TOWNSHIP ZONING HEARING BOARD
DAUPHIN COUNTY, PA
APPLICATION FOR VARIANCE**

GENERAL INFORMATION

Name of Applicant(s) _____

Address _____

Telephone No. _____ Application Date _____

Name of Landowner of Record _____

Subject Property Address _____

Subject Property Zone _____ Dauphin Co. Tax Parcel No. _____

Requested Variance(s) & Section No(s) _____

Name, address and telephone of representative or consultant _____

ADDITIONAL REQUIREMENTS (Include 6 copies of each of the following).

1. Names and addresses of adjoining property owners, including properties directly across a public right-of-way.
2. A written description of the requested variance(s) in sufficient detail to demonstrate compliance with each of those criteria listed in Section 604.4.1 through 8 of the Zoning Ordinance.
3. A scaled site plan with sufficient detail and accuracy to depict the nature of the request, and reflect its relationship with adjoining properties, and their property improvements.
4. For applications within the Floodplain Overlay Zone, a written report and scaled site plan demonstrating compliance with all applicable provisions of Section 230 of the Zoning Ordinance.

FEES

1. The hearing fee is \$_____ pursuant to Section 603.1.2 of the Zoning Ordinance.
2. The applicant shall be required to pay all public notice and advertising costs as specified in Section 603.1.2 of the Zoning Ordinance.
3. The applicant shall pay for one-half (1/2) of the stenographer's appearance fee as specified in Section 603.7 of the Zoning Ordinance.

SIGNATURE

I hereby certify that the information submitted in accordance with this application is true and correct, and I further agree to pay for those costs outlined above.

_____ **Applicant's Signature** _____ **Date**

TOWNSHIP USE ONLY

Date Application Accepted _____ Fee Paid _____

Dates Advertised (two successive weeks no more than 30 and no less than 7 days before hearing)

Property/Township Posting (at least one week before hearing) _____

Date of Hearing (within 60 days of application) _____

Date of Decision (within 45 days of last hearing) _____

Decision _____
