



BOROUGH OF HATFIELD

401 South Main Street Hatfield, PA 19440
(Phone) 215-855-0781 Ext. 107 (Email) code@hatfieldborough.com

ZONING HEARING BOARD APPLICATION

ALL NEW SUBMISSIONS SHALL INCLUDE:

- 12 Copies of Application
- 12 Copies of Plan
- 12 Copy of Deed for all subject Properties
- 2 Electronic Copies of all documents provided

ALL SUBMISSIONS MUST BE MADE TO HATFIELD BOROUGH CODES DEPARTMENT. NO PLANS AT ANY TIME OF THE PROCESS WILL BE ACCEPTED WITHOUT FIRST BEING SUBMITTED IN THIS MANNER.

DATE RECEIVED: _____

RECEIVED BY: _____

ZHB MTG DATE: _____

FEES PAID: _____

PROPERTY LOCATION:

ADDRESS: _____

TAX PARCEL ID: _____

BLOCK: _____ UNIT: _____

OWNER:

NAME (AS ON DEED): _____

PHONE: _____ EMAIL: _____

ADDRESS: _____

APPLICANT:

NAME: _____

PHONE: _____ EMAIL: _____

ADDRESS: _____

APPLICANT'S ATTORNEY:

NAME: _____

PHONE: _____ EMAIL: _____

ADDRESS: _____



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CLASSIFICATION OF APPEAL: (check all that apply)

- Request for Variance from Section(s) _____
- Request for Special Exception from Section(s) _____
- Appeal from the Zoning Officer's letter dated _____
- Challenge to the validity of ordinance or map _____

PROPOSED USE: _____

CURRENT USE: _____

SIZE OF PARCEL(s): _____ **# OF LOTS/UNITS PROPOSED:** _____

ZONING DISTRICT: _____

VARIANCE: State the specific hardship claimed and reason why variance should be grated

SPECIAL EXCEPTION: State the specific legal grounds why the applicant is entitled to the special exception

PAST ZONING RELIEF: State any other Zoning Hearings for this property? If what dates and relief granted

I hereby certify that the proposed application and subsequent actions or uses are authorized by the owner. As the owner or authorized representative, I agree to comply with all rules, regulations of Hatfield Borough and agree to be responsible for the payment of all engineering and legal fees associated with this application. I further authorize representatives of Hatfield Borough to enter the subject property in order to verify existing conditions I have examined this application, its requirements and to my knowledge and belief, it is a true, correct and complete application

Owner / Authorized Name

Owner / Authorized Signature

Date



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ZONING HEARING BOARD APPLICATION

Waiver

To: Hatfield Borough Planning & Zoning Officer
Hatfield Borough Manager
Hatfield Borough Zoning Hearing Board
Hatfield Borough Solicitor
Hatfield Borough Zoning Hearing Board Solicitor

RE: Zoning Hearing Board

Address: _____

I/We hereby waive the provision that the hearing before the Zoning Hearing Board of Hatfield Borough to be held within 60 days of filing the application as required by the Pennsylvania Municipalities Planning Code.

Signature

Print Name

Waiver

To: Hatfield Borough Planning & Zoning Officer
Hatfield Borough Manager
Hatfield Borough Zoning Hearing Board
Hatfield Borough Solicitor
Hatfield Borough Zoning Hearing Board Solicitor

RE: Zoning Hearing Board

Address: _____

I/We hereby waive the provisions of the Hatfield Borough Zoning Hearing Board or the Zoning Hearing Solicitor, shall render a written decision, or when no decision is called for, make written findings on the application within 45 days after the last hearing before the Board or Zoning Hearing Solicitor as required by the Pennsylvania Municipalities Planning Code.

Signature

Print Name