



SWATARA TOWNSHIP

599 EISENHOWER BLVD.
HARRISBURG, PA 17111
717-564-2551
FAX: 717-564-5895

Zoning Hearing Board Application

Name of Applicant _____

Applicant Address/Phone _____

Type of Application

Variance

Appeal from Municipal Action

Special Exception

Other _____

Under the Provisions of the Swatara Township Ordinance No. 2010-01, *Zoning*

Article _____ Section _____ Item _____

Article _____ Section _____ Item _____

Article _____ Section _____ Item _____

Property Information

Property Location _____ Dauphin Co. Parcel No. _____

Property Owner (If Different from Applicant) _____

Interest in Property (If other than Owner) _____

Owner Address/Phone _____

Property - Lot Area _____ Lot Width _____ Lot Depth _____

Zoning District _____ Present Use _____

Existing Improvements on Property _____

(In addition, please attach a plot plan illustrating the size of the lot(s), existing improvements, proposed improvements, and relevant site characteristics.)

Nature or use of properties within 300 feet _____

Describe in detail the nature of your request, the grounds therefor, and reasons why it should be granted. Attach supporting documents and additional sheets if needed.

- This application must be accompanied by applicable filing fees as established by Resolution by the Swatara Township Board of Commissioners (\$750.00). In addition to the filing fee, the applicant shall also be responsible for costs incurred in excess of the initial filing fee.
- Please provide eight (8) copies of this completed application and all supporting documents.

Certification by Applicant

I hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my knowledge and belief.

Date _____

Signature