TOWNSHIP of HEIDELBERG, Berks County

Berks County, Pennsylvania P.O. Box 241, Robesonia, PA 19551

Office: (610)693-3197 Email: info@heidelbergtownship.org

OFFICAL: Date Filed_____ USE ONLY: Fee Paid_____ APPLICATION FEE: \$1,000

NOTICE OF APPEAL OR APPLICATION TO THE HEIDELBERG TOWNSHIP ZONING HEARING BOARD (To be filed in triplicate)

Appeal is	here	eby made by the undersigned (check applicable item or items)
()	from the determination of the Zoning Officer pertaining to Section of the Zoning Ordinance.
()	for a variance from Section of the Zoning Ordinance.
()	for a Special Exemption permitted under Section of the Zoning Ordinance.
	_	Officer's decision: A copy of the zoning permit application and the Zoning Officer's ched hereto.
APPELLA Name:	NT	
Address:		
Phone:		
OWNER Name:		
Address:		
Phone:		
ATTORNE Name:	EY (i	f any)
Address:		
Phone:		

Interest of Appellant		
()	Owner by deed attached
()	Equitable owner under Agreement of Sate dated
()	Lessee under lease dated Lessee has permission of the owner of the property to present this application.
()	Other (explain)
Αŗ	plic	eation relates to: (check applicable item or items)
() U:	se () Lot Area () Yards () Height () Sign
() E>	xisting Building () Proposed Building () Other
Br	ief c	lescription of real estate affected:
Lc	cati	on: (specific location, with direction and distance from nearest intersection.)
Lo	t Siz	ze:
Pr	esei	nt Use:
Pr	esei	nt Zoning Classification:
Pr	esei	nt Improvements upon land:
		is an appeal from action of the Zoning Officer, specify the alleged error of the Zoning r.
De	escr	ibe the relief desired by Applicant:

6.	Describe the reasons Appellant believes Board should approve desired action (refer to action or sections of Ordinance under which it is felt that desired action may be allowed, and note whether hardship is (or is not) claimed, and the specific hardship.
7.	Has previous appeal been filed in connection with these premises?
	If yes, list the following: Date of prior Zoning Hearing Board decision:
	Name of Applicant in prior decision:
	Relief granted in prior decision:
NOTE:	Attach two copies of plan of real estate affected, drawn to scale and with north arrow, indicating location and size of improvements now erected and proposed to be erected thereon, or other change desired, also any other information required by the Zoning Hearing Board. If more space is required, attach a separate sheet and make specific reference to the question being answered. In question 6 above, include the grounds for the appeal or reasons both with respect to law and fact for granting the appeal or the special exception or variance Specifications or errors must state separately the appellant's objections to the action of the Zoning Officer with respect to each question of law and fact which is sought to be reviewed.
CONT	EBY DEPOSE AND SAY THAT ALL OF THE ABOVE STATEMENTS AND THE STATEMENTS AINED IN ANY PAPERS OR PLANS SUBMITTED HEREWITH ARE TRUE TO THE BEST OF MY /LEDGE AND BELIEF.
Date:	
Appel	lant:
Appel	lant: