Please contact

Rich Brittingham, Zoning Officer

before submitting a

Zoning Hearing Board Application

Rich can be reached at

215-536-4066 ext. 124

Or

rich@richlandtownship.org

Zoning Hearing Board of Richland Township

1328 California Road, Suite A Quakertown, PA 18951 215-536-4066

One (1) original copy of this application, and three (3) plan sets and drawings, must be submitted to the Zoning Officer together with the application fee. An electronic submittal is required, and each plan sheet is to be labeled identifying each Title Plan Sheet. No application will be accepted without an adequate plan of the subject premises.

The un	ndersigned applicant hereby: (check appropriate letters)
	_ Appeals from a determination of the Zoning Officer.
	_ Requests a special exception.
	_ Requests a variance. _ Challenges the validity of a zoning ordinance or map.
	Requests other relief within the jurisdiction of the Zoning Hearing Board as
	established in § 909.1(a) of the Pennsylvania Municipalities Planning Code.
Name	and address of owner of property:
Telepho	one number
name (and address of applicant:
	one number
Telepho	
Telepho	one number
Telepho	one numbericant is not the owner, state applicant's authority to bring this application:
Telepho If appl: (attach Addres	one number icant is not the owner, state applicant's authority to bring this application: documents in support of said authority to this application)
Telepho If appl (attach Addres Attach propos	one number icant is not the owner, state applicant's authority to bring this application: documents in support of said authority to this application) as of property: plot plan of property drawn to scale indicating location and size of improvement
Telepho If appl: (attach Addres Attach propos	one number icant is not the owner, state applicant's authority to bring this application: documents in support of said authority to this application) as of property: plot plan of property drawn to scale indicating location and size of improvemented and presently existing and indicating a compass reference.

10.	Desc	cribe the buildings and other improvements located on the property:
11.	Stat	e the size of the property:
	OU AR LOWIN	E APPEALING FROM A DETERMINATION OF THE ZONING OFFICER, COMPLETE THE
	a.	The action taken was:
	b.	The date action was taken:
	c.	Attach a copy of any written order issued by the Zoning Officer in connection with this matter.
	d.	The foregoing action was in error because:
	e.	If you allege the existence of a non-conforming use, state the nature of such use and the date on which it began:
		ARE CHALLENGING THE VALIDITY OF A ZONING ORDINANCE OR MAP, TE THE FOLLOWING:
	a.	Identify the provision of the ordinance or map which you believe to be invalid:
	b.	The challenge is ripe for decision because:
	c.	The provision challenged is invalid because:
IF Y		RE REQUESTING A SPECIAL EXCEPTION COMPLETE THE FOLLOWING:
	a.	Nature of special exception sought is:

	The special exception is allowed under Chapter 27 Section Subsection the Richland Township Zoning Ordinance. (If more than one exception is requested ordinance references on separate page)
c.	The reason for the request is:
OU A	RE REQUESTING A VARIANCE COMPLETE THE FOLLOWING:
a.	Nature of variance sought is:
b.	The variance is from Chapter 27 Section Subsection of the Rich Township Zoning Ordinance. (If more than one variance is requested, list ordinance refer on a separate page)
c.	The nature of the unique circumstances and the unnecessary hardship justifying request for a variance is:
	ARE REQUESTING OTHER RELIEF WITHIN THE JURISDICTION OF IEARING BOARD, COMPLETE THE FOLLOWING: The nature of the relief sought:

BY FILING THIS APPLICATION, APPLICANT AGREES TO REIMBURSE RICHLAND TOWNSHIP FOR ALL COSTS INCURRED BY THE PROCESSING OF THIS APPLICATION TO THE EXTENT THAT THOSE COSTS EXCEED THE FILING FEE.

I am not represented by a	n attorney in connection with this application.	
I am represented by an at	torney in connection with this application.	
Attorney		
Address		
T)		
500 feet of the perimeter of the pr parcel number together with the	I addresses of all persons owning property which is located within roperty which is the subject of this application, identified by taname and address of the present owner of the said parcel and Township or Bucks County Tax Mapping located on the third ise:	ıx ıs
Tax Map Number of Property	Name and Address of owners of property	
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COMMONWEALTH OF PENNSY COUNTY OF The undersigned, being duly sy above-named applicant, that he of the owner, and that the foreg	vorn according to la e/she is authorized	to and does take th	
	Appl	licant	
Sworn and subscribed before me on this day of			
20			

Notary Public

APPLICATION FOR HEARINGS TO EITHER THE ZONING HEARING BOARD OR BOARD OF SUPERVISORS					
	Fees	Escrow			
Residential/Agricultural	\$850				
Residential Subdivision (3 or more lots)	\$1,250+\$10 per unit				
Institutional/Recreational	\$1,800				
Commercial/Industrial	\$1,800				
Challenge to Validity of Zoning Ordinance	\$10,000	\$3,000			
Conditional Use					
Residential/Agricultural	\$850	\$3,000			
Commercial/Industrial/Institutional/Recreational	\$1,800	\$3,000			
Curative Amendment	\$10,000	\$3,000			
Petition for Rezoning	\$2,500	\$3,000			
Appeal of Zoning Violation	\$900				
Appeal of Floodplain Management Ordinance	\$900				