

ZONING BOARD OF APPEALS APPLICATION

Please Review Instruction Page Before Completing

FEE: \$300.00 DATE PAID: _____

1. Applicant

Date: _____ Name: _____
Address: _____ City & Zip _____
Phone: (Home) _____ (Business) _____
E-mail _____ Parcel Zoning: _____
Parcel ID # 07- _____ Parcel Address _____

2. Other Parties of Interest (Title Holder, Contract Purchaser, Partners)

Name: _____ Name: _____
Address: _____ Address: _____
Phone: _____ Phone: _____
E-mail: _____ E-mail: _____
Interest: _____ Interest: _____

Name: _____ Name: _____
Address: _____ Address: _____
Phone: _____ Phone: _____
E-mail: _____ E-mail: _____
Interest: _____ Interest: _____

3. Variance Request: The applicant requests a variance from the following Springfield Township Code of Ordinances provisions:

(a) **Springfield Township Code of Ordinances: Chapter _____ Section _____**

Describe variance(s) requested:

(b) **What special conditions and circumstances exist which are peculiar to the land, structure(s) or building(s) involved, and which are not applicable to other lands, structures or buildings in the same Zoning District?**

(c) **How would literal interpretation of the provisions of the Springfield Township Code of Ordinances deprive you of rights commonly enjoyed by other properties in the same Zoning District under the terms of this ordinance?**

(d) **Did the special conditions and circumstances referenced in (b) above result from the applicant? YES___ NO___**

(e) **Demonstrate that the variance is the minimum variance that will make possible the reasonable use of the land, building(s) or structure(s). (This can be done through both text and drawing.)**

Have alternatives been explored? YES___ NO___ (Specify):

(f) **Demonstrate that the granting of the variance is in harmony with the Master Plan and Springfield Township Code of Ordinances and will not be injurious to the neighborhood, or otherwise detrimental to the public welfare:**

X _____
Signature of Petitioner

X _____
Signature of Owner-Deed Holder

CERTIFICATION: I hereby certify that I have read and understand the application instructions and reviewed the Springfield Township Code of Ordinances, Chapter 40, Section 63 regarding the powers, duties and limitations of the Springfield Township Zoning Board of Appeals. I also hereby grant permission to any Township Official, consultant or employee to access the property in order to review the proposal submitted.

Signature of Petitioner: _____ Date: _____

Signature of Owner: _____ Date: _____

TOWNSHIP USE ONLY

APPROVED / DENIED By Board of Appeals on _____