# Application to White Haven Borough
# Zoning Hearing Board or Governing Body

1. Name, address and phone number of Applicant:

_____

_____

_____

2. Name, address and phone number of Landowner (if different than applicant):

_____

_____

_____

3. Zoning District in which the subject property is located:

_____

4. Present use of land and structure(s):

_____

_____

_____

5. Proposed use of land and structure(s): _____

_____

_____

6. Type of Appeal (check whichever is applicable to your request):

_____ A Variance under §1109 of the Zoning Ordinance.

_____ A Special Exception under §1110 of the Zoning Ordinance.

_____ A Conditional Use under §1111 of the Zoning Ordinance.

_____Other (explain):_____

7. Based upon the type of appeal listed under item number 6 above, specifically state the nature of your request, including the grounds in support of your appeal.

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8. List the names and addresses of all adjoining property owners, including those located immediately across a street from the property subject to the application.

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_____

_____

_____

_____ _____

Signature of Landowner Date

_____ _____

Signature of Applicant Date

**For Borough Use Only**

A. Fee Paid: $_____ Date Paid: _____ Manner of Payment: _____

B. Date of Receipt of Appeal: _____

C. Date of Hearing: _____

D. Date of Decision: _____

E. Attach the Zoning Permit Application Denial Letter or the Enforcement Notice being Appealed signed by the Zoning Officer.