

BOROUGH OF ORWIGSBURG

333 S LIBERTY STREET
ORWIGSBURG, PA 17961
570.366.3103 FAX 570.366.3106
www.orwigsburg.net

Application to the Zoning Hearing Board

Fee:

\$600.00 Single-Unit Residential - \$1,500.00 Commercial or Multi-Unit Application

1. Application for: ☐ Variance ☐ Special Exception
☐ Other (explain) _____

2. Name & Address of Applicant: _____

3. Name & Address of Owner of Property: _____

4. Description & Address of Property to be Affected by Proposed Change: _____

5. Zoning Classification of Property: _____

6. Present Use of Property: _____

7. Proposed Use of Property: _____

8. Applicable Zoning Ordinance Section(s): _____

9. Reason Application Should Be Granted: _____

10. Description of Improvements and/or Use; General Construction Thereof: _____

11. Attach plot of property, indicating size of lot and location and size of improvements thereon.

12. The undersigned does hereby make application to the zoning board as indicated and testify that the information contained herein is true and correct.

Signed _____ Date _____

\$ _____ Filing Fee Received Date _____

Received By _____