

Jefferson Township - Lackawanna County-

487 Cortez Road

Jefferson Township, PA 18436

Phone: 570-689-7028

email: cwatt@jeffersontownshippa.com

ZONING HEARING BOARD APPLICATION FOR APPEAL AND HEARING

APPLICATION IS HEREBY MADE FOR ACTION AT A PUBLIC HEARING IN CONFORMITY WITH REQUIREMENT ZONING ORDINANCES OF JEFFERSON TOWNSHIP AND ANY AND ALL AMENDMENTS THERETO.

Action requested: VARIANCE SPECIAL EXCEPTION INTERPETATION
 CHALLENGE CHANGE IN ZONING DISTRICT
 CURATIVE AMENDMENT APPEAL OF ZONING OFFICERS DECISION
OTHER ACTION _____

NAME OF APPLICANT _____ PHONE # _____
ADDRESS _____

ZIP _____

INTEREST OF APPLICANT _____

LOCATION OF SUBJECT PROPERTY _____

ZONING DISTRICT _____ TAX ASSESSMENT NUMBER _____ EXISTING USE _____

DETAILS OF ACTION SOUGHT _____

REASON FOR SEEKING ACTION: _____

THE APPLICANT HEREBY AGREES THAT ALL MATERIAL SUBMITTED WITH THIS APPLICATION SHALL BE MADE A PART THEREOF AND DOES BECOME AN INTEGRAL PART OF THE RECORDS OF JEFFERSON TOWNSHIP AND SHALL NOT BE RETURNED TO SAID APPLICANT AND ALSO CERTIFIES AND STATES THAT TO THE BEST OF HIS KNOWLEDGE AND BELIEF ALL DATA, STATEMENTS AND INFORMATION SUBMITTED ON OR WITH THIS APPLICATION ARE TRUE AND CORRECT.

SIGNATURE OF APPLICANT: _____

CERTIFICATION OF OWNERSHIP AND ACKNOWLEDGEMENT OF APPLICATION

Commonwealth of Pennsylvania

County of Lackawanna

On this, the _____ day of _____, 20____, I (we) depose and says that I (we) are owners of the property described in this application and that the said application was made with my (our) full knowledge and/or direction and does hereby agree with the said application and to the submission of the same as provided by law.

Property owner(s) _____

Date _____, 20____

BELOW FOR TOWNSHIP USE

DATE RECEIVED _____ FEES \$ _____, DATE FEES RECEIVED _____

PUBLICATION DATES _____ AND _____ APPLICANT NOTIFICATION DATE _____

TWP PLANNING COMMISSION DATE _____ ACTION RECOMMENDATION _____

COUNTY PLANNING COMMISSION DATE _____ ACTION RECOMMENDATION _____

HEARING DATE _____ TIME _____ ORDER OF BOARD _____

Zoning Officer _____

Jefferson Township
-Lackawanna County-
487 Cortez Road
Jefferson Township, PA 18436

Phone: 570-689-3307
Fax: 570-689-7863

Email: zoningofficer@jeffersontownship.com

CHECKLIST FOR SUBMITTING A ZONING HEARING BOARD APPLICATION

As mandated in ARTICLE 14 – ZONING HEARING BOARD
of the Jefferson Township Zoning Ordinance.

_____ Copy of Zoning Application denial for a Zoning Permit and/or Notice of Violation (if applicable) being appealed.
Section 1409.1 requires that “the applicant submits an application for a Zoning Permit to the Zoning Officer in accordance with Section 1202.1 of this Ordinance” before submitting a Zoning Hearing Board application

_____ Copy of Zoning Hearing Board Application for Appeal and Hearing

_____ Read Article 14 SECTION 1406 HEARINGS in the Jefferson Township Zoning Ordinance.
Provide information from applicant - as needed to the Zoning Hearing Board.
Understand the responsibilities of the property owner / applicant and be prepared to comply accordingly.

_____ If requesting a use classified as a “SPECIAL EXCEPTION”:
Read in ARTICLE 6 - SPECIAL EXCEPTIONS
SECTION 603 - PLANS, INFORMATION AND PROCEDURES FOR A SPECIAL EXCEPTION USE in the Jefferson Township Zoning Ordinance.
Provide the required information from applicant - as needed to the Zoning Hearing Board.
Understand the responsibilities of the property owner / applicant and be prepared to comply accordingly.

Payment:

_____ Appeal and Hearing application fee – check for \$500.00 payable to “Jefferson Township”