APPLICATION/APPEAL TO THE ZONING HEARING **BOARD OF UNION TOWNSHIP**

Α.	All questions that apply to the application should be fully answered. If all
	questions are not answered, the application shall be returned.
B.	If you need more space, use blank sheets but please use paragraph numbers corresponding with this application.
C.	Photos or other exhibits are useful to the Zoning Hearing Board and are encouraged to be attached to this application. This application should include items such as lot dimensions and locations of building (both planned and present).
D.	The application must be signed by all applicants, and the affidavit must be notarized by a Notary Public or District Justice. Consent of the owner, where applicable, should be completed.
E.	Important property rights are involved with this application, and you may desire to seek the advice of an attorney before filing this application.
F.	The date this application is considered filed shall be the date noted below and not t date the application was completed or notarized.
HIS	APPEAL PETITION HAS BEEN RECEIVED BY ME THIS DAY O
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the required fee.

1.	Give full names, addresses and telephone numbers of applicant(s):
2.	Do you own the property covered by this appeal?YESNO If not, give the full name, address and phone number of the owner:
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3.	a. If you do not own the property, what is your interest in the property?
	b. Attach the written authority from owner (or controlling document, lease or rental agreement) that allows the applicant to make this application.
4.	Check the type of relief you are seeking:
	() Appeal from municipal officer or engineer or an appeal from a zoning violation (include \$500.00 fee with this application).
	() Application for variance from Zoning Ordinance. (include \$500.00 fee with this application).
	() Application for special exception which is expressly provided for in Zoning Ordinano (include \$500.00 fee with this application).
į.	Substantive or procedural challenge to a Union Township Zoning Ordinance or Subdivision and Land Development Ordinance (include \$2,000.00 fee with this application).

	() Application for a curative amendment to the Union Township Zoning Ordinance (include \$2,000.00 fee with this application).					
	() Application for an amendment to the Union Township Zoning Ordinance or Subdivision and Land Development Ordinance (include \$300.00 fee with this application).					
	() All other zoning-related proceedings (except planning approvals of PRDs and subdivision and land developments), whether before the Union Township Zoning Hearing Board or the Board of Supervisors of Union Township (include \$500.00 fee with this application).					
5,	Gi rea	ive a brief description (i.e. lot size, square footage and dimensions) and location of the al estate covered by this appeal.					
6.	tne	clude a copy of the latest deed to the property (including and recorded easements) and volume and Page numbers where the deed is recorded in the Berks County Recorder Deeds Office.					
7.	Ple	Please provide the following:					
	Pro	esent zoning classification:					
	Th	e present and future improvements:					
	The	e present use of the property:					
8.	a. 1	Please provide the Article and Section of the Union Township Zoning Ordinance of 995 from which relief is desired:					

	o. Please provide in detail the relief sought by this application and why it should be granted:
	If a substantive or procedural challenge to the validity of the Union Township Zoning Ordinance or Subdivision and Land Development Ordinance, please provide in detail the grounds for such a challenge:
d	If a variance is requested, please provide the specific details regarding the unnecessary hardship allegedly imposed upon you, how this hardship arose, and the unique physical circumstances of the property necessitating approval:
e.	If this is an appeal from the ruling of an administrative official, please attach a cop of the ruling and:
	Identify the ruling which has been made against you:
	The reason why you feel the ruling was wrong:

	le sketches or draw			
). List the names, ad	ldresses and telepho	one numbers of	all property owner	rs who bore
On or who are loc	eated within 500 fee	at of the property	y.	
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Section of the sectio				
Will you be repres	sented by an attorne	y?YES _	NO.	
If yes, my attorne	y is: Name:			
	Address:			
	<u>-</u>			
	Phone:			:
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IIS APPEAL PETIT	YON is executed by	applicant(s) th	is	day of
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HIS APPEAL PETIT	TON is executed by, 20_	y applicant(s) th 	is	day of

township officials and representatives to view	this application hereby authorizes the appropriate ew and inspect the property which is the subject of ency of the application and the construction related
	Owner(s)
COMMONWEALTH OF PENNSYLVANIA	A :
COUNTY OF BERKS	: SS
On the day of personally appeared	A.D. 20, before me, the undersigned officer
me or satisfactorily proven to be the person (application and who acknowledged that the incorrect to the best of their knowledge, inform	(s) whose name is subscribed to the within information provided in this application is true and
IN WITNESS WHEREOF, I have here	eunto set my hand and official seal.

Notary Public