



# THE BOROUGH OF EDINBORO

## BUILDING AND ZONING DEPARTMENT

124 Meadville Street, Edinboro, PA 16412-2502 // (814) 734-1812 ext. 139 / Fax: (814) 734-4492  
edinboro.codes@gmail.com

### APPLICATION TO APPEAR BEFORE THE ZONING HEARING BOARD

Applicant Name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Property owner & Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

I, the applicant (owner/agent) hereby file this application to appear before the Edinboro Zoning Hearing Board for the following:

Variance ☐ Special Exception ☐ Other ☐  
Appeal of Zoning Enforcement / Violation Notice ☐ Declaration of Non Conforming Use ☐

Property Address: \_\_\_\_\_

Parcel ID#: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Specific Details of Request: (include scaled drawings of site, building and etc.) You may attach additional documentation as needed.

I, the applicant hereby request to appear before the Edinboro Zoning Hearing Board in regards to the matter stated on this application. I acknowledge my appearance is subject to provisions and conditions of the Edinboro Zoning Ordinance, the Pennsylvania Municipalities Planning Code Act 247 and the Pennsylvania Sunshine Act for Open Meetings and Hearings. The provisions include but not limited to: required public notice and legal advertising, sworn testimony during a public hearing and board decision is pursuant to specific legal criteria as outlined in the Pa. Municipalities Planning Code and other specific applicable case law and statutes. Further, my application is subject to a filing fee as determined by current Borough Council resolution and is attached.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Processed: \_\_\_\_\_ Hearing Number: \_\_\_\_\_ Invoice: \_\_\_\_\_

Payment: ☐ check ☐ cash ☐ money order ☐ charge Cashiered: \_\_\_\_\_ By: \_\_\_\_\_

ZHBA20170701

updated 04/23/19



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