Frankenlust Township

Zoning Board of Appeals

VARIANCE APPLICATION

$550.00 Plus

Dated Applied _____ **Proposed Hearing Date** _____

This Application will not be accepted if incomplete. **All required materials must be submitted at least 21 calendar days prior to the date of the Zoning Board of Appeals Mtg.**

APPLICANT INFORMATION:
(If different than owner)
Name:_____
Address:_____
_____
Phone:_____

OWNER INFORMATION:
Name:_____
Address:_____
_____
Phone:_____

PROPERTY INFORMATION:
Address or Location_____
Permanent Parcel #_____
Zone District (Current)_____
Property Size_____
Legal Description (Include on Reverse Side)

REASON FOR REQUEST: (If more space is needed, use other side.)
Note: Include sketch and/or drawings and a detailed description of plan when applicable.

_____

_____

*** I/WE HAVE BEEN GIVEN THE PROCEDURE COVER SHEET AND AGREE TO PAY FOR ALL ADDITIONAL FEES SHOULD THEY BE NECESSARY. I/WE ALSO HEREBY ATTEST THAT THE INFORMATION ON THIS APPLICATION FORM IS, TO THE BEST OF MY/OUR KNOWLEDGE, TRUE AND ACCURATE.**

_____ _____
(Applicant) (Owner)

_____ _____
(Applicant) (Owner)

_____
DONNA L. REICHARD, CLERK

_____ _____
Date Received Cash or Check #

*NOTE: The above list consists of costs normally associated with developmental projects within Frankenlust Twp. This list is made available as a service to any potential developer to aid with the prediction of project costs. By no means is it intended to be all inclusive. There may be other expenses pertaining to a project that are specific to that particular site or development that are not listed. These costs may be increased without notice.