

**WEST PENNSBORO TOWNSHIP BOARD OF SUPERVISORS  
CUMBERLAND COUNTY, PA  
APPLICATION FOR AMENDMENT TO THE ZONING MAP  
AND/OR ZONING ORDINANCE NO. \_\_\_\_\_  
(Section 704)**



**GENERAL INFORMATION**

Name of Applicant(s) \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_ Application Date \_\_\_\_\_

Name of Landowner of Record \_\_\_\_\_

Subject Property Address \_\_\_\_\_

Subject Property Zone \_\_\_\_\_

Nature of Request \_\_\_\_\_

Name, address and telephone of representative or consultant \_\_\_\_\_

**ADDITIONAL REQUIREMENTS** (Include 10 copies of each of the following).

- \_\_\_\_\_ 1. A written legal description and survey map of any property in question;
- \_\_\_\_\_ 2. A written description of the reasons why the amendment is beneficial to the Township;
- \_\_\_\_\_ 3. For proposed text amendments, an Ordinance that incorporates the desired changes; and
- \_\_\_\_\_ 4. A signature page signed by at least one record owner of the property in question, whose signature shall be notarized, attesting to the truth and correctness of all the facts and information submitted by this application.
- \_\_\_\_\_ 5. For curative amendments, the following additional requirements apply:
  - \_\_\_\_\_ A. A written description of the reasons supporting the request to be considered;
  - \_\_\_\_\_ B. Plans and explanatory materials describing the proposed use or development that would not be permitted by the challenged ordinance in sufficient detail to demonstrate the need for approval of the request and evaluation of the challenged ordinance or map; and,
  - \_\_\_\_\_ C. An amendment or amendments to the Zoning Ordinance or Zoning Map that would cure its alleged defect.

**FEES**

1. The hearing fee is \$ \_\_\_\_\_ pursuant to Section 703 of the Zoning Ordinance, and
2. The applicant shall be required to pay all public notice and advertising costs as specified in Section 704.2 of the Zoning Ordinance.

OVER

**SIGNATURE**

I hereby certify that the information submitted in accordance with this application is correct, and I further agree to pay for those costs outlined above. In order to ensure that the review processes and administration of this Zoning Ordinance are accomplished in a manner that is readily accessible to all citizens of the Township, any information and/or plans submitted associated with any application, permit, petition, appeal or any other request shall be provided in a form that is reproducible, without restriction, by any and all interested parties and/or the general public. The submission of copyrighted materials will not be accepted.

\_\_\_\_\_, \_\_\_\_\_  
**Applicant's Signature** **Date**

**ADMINISTRATION**

Date Application Accepted \_\_\_\_\_ Total Costs \_\_\_\_\_

Dates Advertised (two successive weeks no more than 30 and no less than 7 days before hearing §704.2.B.1.) \_\_\_\_\_

Property Posting (at least one week before hearing §704.2.B.2.) \_\_\_\_\_

Enactment Notice Advertisement (once, no more than 60 and no less than 7 days before enactment §704.2.C.) \_\_\_\_\_

Township Planning Commission Submission Date (no less than 30 days before public hearing §704.2.D.) \_\_\_\_\_

Township Planning Commission Hearing Date & Recommendation \_\_\_\_\_

Western Cumberland County Region Referrals Date (no less than 45 days before public hearing §704.2.E.) \_\_\_\_\_

County Planning Commission Submission Date (no less than 45 days before public hearing) \_\_\_\_\_

County Planning Commission Hearing Date & Recommendation \_\_\_\_\_

Date of Hearing (for curative amendments within 60 days of application) \_\_\_\_\_

Date of Decision (for curative amendments within 45 days of last hearing) \_\_\_\_\_

Decision \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
**Chairman** **Vice Chairman** **Secretary**