

DO NOT WRITE IN THIS SPACE--- FOR OFFICE USE ONLY.

Zone district in which the property in question is located _____
Date application filed with the Zoning Hearing Board _____
Date hearing advertised at premise _____
Date hearing advertised in newspaper _____
Fee Paid \$ _____ Date Paid _____

ZONING HEARING BOARD
DANVILLE BOROUGH
MONTGOMERY COUNTY, PA.

APPLICATION FOR SPECIAL EXCEPTION

The undersigned requests the granting of a Special Exception by the Zoning Hearing Board of the Borough of Danville as set forth below:

BACKGROUND

1. Name, address and telephone number of the applicant(s):

Name: _____

Address _____

Telephone _____ - _____ - _____

2. Address of the property in question:

3. What is your interest in the property in questions? Please set forth whether you own the property, lease the property, intend to lease the property, or intend to purchase the property under an agreement of sale:

b. That the use is so designed, located and proposed to be operated that the public health, safety, welfare and convenience will be protected.

c. That the use will not cause substantial injury to the value of other property in the neighborhood where it is to be located.

d. That the use shall be compatible with adjoining development and the character of the zone district where it is proposed to be located.

e. That adequate landscaping and screening is provided as required in Section 139-25 and as otherwise provided in the Code.

f. That adequate off-street parking and loading is provided and ingress and egress is so designed as to cause minimum interference with traffic on abutting streets.

g. That the use conforms to all applicable regulations governing the district where located, except as may otherwise be determined for large-scale development.

9. Attach a check in the amount of \$300 payable to DanvilleBorough. The \$300 fee is required to cover the costs of advertising, postage and stenographer charges. After all the bills are paid for your Special Exception hearing, you will be refunded any remaining monies in excess of \$25.00. Indicate below to whom the remaining monies should be refunded.

Name: _____

Address: _____

HEARING REQUEST

I request a hearing before the Zoning Hearing Board and certify the facts set forth in the application are true. I understand if this application is not complete, or if the information requested is not provided, this application can be rejected by the Zoning Hearing Board as an incomplete application.

APPLICANT SIGNATURE: _____

DATE: _____

ZONNING HEARING BOARD

DECISION

The special exception is hereby granted as presented.

By: _____ Date: _____

The special exception is hereby granted with the following conditions:

_____.

By: _____ Date: _____

The special exception is hereby denied.

By: _____ Date: _____

A decision will be rendered at a later date.

By: _____ Date: _____

