

**APPLICATION FOR AMENDMENT OF ZONING ORDINANCE
(Request for Rezoning)
UPPER HANOVER TOWNSHIP**

Date of Application _____

1. Name of Applicant _____
Address of Applicant _____
Telephone Number of Applicant _____

2. What is your interest/relation to the application? (e.g. Property Owner) _____

3. Property Owner (if other than Applicant) _____

Address of Property Owner _____

4. Name of Applicant's Representative _____
Address of Representative _____

Telephone Number of Representative _____
Fax Number of Representative _____

5. Description of area and properties proposed for rezoning (include street names and addresses, block and unit numbers and tax parcel numbers for all properties located within the area proposed for rezoning.)

6. State the existing Zoning District(s) classification for all properties located within the area proposed for rezoning:

7. State the proposed Zoning District classification to which the existing Zoning District is proposed to change: _____

8. Provide a statement of the circumstances in the proposed district and the abutting districts and any other factors on which the Applicant relies as reasons for supporting the proposed rezoning. _____

9. What is the approximate time schedule for the beginning and completion of development in the area?

10. Provide information about the market area to be served by the proposed development, if a commercial use, including population, effective demand for proposed business facilities and any other information describing the relationship of the proposed development to the needs of the market area.

REQUIRED ATTACHMENTS AND FILING DIRECTIONS

The following attachments shall be included as part of the application:

- A. A plan or map showing the extent of the area to be rezoned and the district to be affected, streets bounding and intersecting the area, land use and zoning classification of abutting districts.
- B. Photographs of the area to be rezoned and abutting areas.
- C. A site plan to scale indicating the location of structures, uses, areas for off-street parking and loading.
- D. An analysis with sufficient information regarding the impact on traffic, water supply, sewage disposal, environmental issues, and any other issues relevant to the proposal. This analysis would include, but is not limited to, an Environmental Assessment Statement, in compliance with Section 819, compliance with the Performance Standards of Section 1704, and submission of a Traffic Impact Study in compliance with Section 825.
- E. All reviews required by the Pennsylvania Departments of Transportation and Environmental Protection.
- F. Copy of Deed to property in question.

- G. Envelopes (#10 size) addressed to the addresses to which real estate tax bills are sent for each property located within the area proposed for rezoning with sufficient pre-stamped first-class mail postage attached.
- H. Filing Fee of \$400.00 payable to "Upper Hanover Township". Applicant will be billed after the hearing for 1/2 of the Stenographer appearance fee. Applicant will pay 100% of the costs of transcript preparation. If the hearing is continued, the Applicant will be billed \$200.00. Escrow fee: \$2,000.00 - when the balance in the escrow amount falls below 25% of the original balance, the Applicant is required to deposit additional funds to bring the balance up to the original amount.
- I. Filing Fee of \$210.00 payable to "Montgomery County Treasurer".
- J. The Applicant shall file one (1) original and thirteen (13) copies for a total of fourteen (14) applications, to include the application form and all attachments.

I hereby certify that all of the above statements and the statements contained in any paper or papers submitted herewith are true and correct to the best of my knowledge, information and belief.

I further authorize representatives of Upper Hanover Township to enter the subject property in order to verify existing conditions. I specifically release individuals who enter on or about the site during an inspection from any liability, obligation or claim that may arise as a result of their entry onto or travel about the said property.

Date Applicant

Date Applicant

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(TOWNSHIP USE ONLY)

Date Received by Township Secretary _____

Application No.: _____ By: _____

Application Fee Received _____
Amount Check Number Date