

Borough of Aldan

One W. Providence Road
Aldan, Pennsylvania 19018
(610) 626-3554
FAX (610) 622-3597



Application No. _____

Date _____

PETITION OF APPEAL TO ZONING BOARD OF ALDAN BOROUGH

For a Variance/Special Exception
(circle one)

Appellant _____

Address _____

(When there are a number of appellants, the additional names shall be entered on the back of this petition.)

Attorney (If any) _____

LOCATION OF PROPERTY _____

Owner(s) _____ Address _____

Agent _____ Address _____

If applicant is not the owner or the agent, state his/her interest:

Appeal is taken from the action of the Zoning Officer or his designee in the refusal of a permit for:

State objections to the refusal: _____

NOTE: The Specifications of Errors must state separately the Appellant's objections to the action of the Zoning Officer and or his designee with respect to each question of law and fact which is sought to be reviewed. All appeals directed to the Zoning Board of Aldan Borough must be accompanied by a check made out to the order of "Treasurer, Borough of Aldan" in the amount of \$ _____ as a deposit fee toward the costs of advertising, hearing, etc.. Thirteen (13) copies of a plan outlining the variance request or special exception must be submitted with the application. The plan will be reviewed by the Aldan Borough Zoning Board on the _____ of the month at 7:30 p.m. at the Wm. Reinl Recreation Building.

Where there are a number of Appellants the additional names shall be entered below.

Appellant _____

Address _____

Appellant _____

Address _____

Appellant _____

Address _____

COMMONWEALTH OF PENNSYLVANIA :

COUNTY OF _____ : SS

Before me, the subscriber, a Notary Public for the Commonwealth of Pennsylvania personally appeared _____ who being duly _____ according to law, doth depose and say: that all the above statements and/or drawings and/or attached plans are true. _____ and subscribed to before me, this _____ day of _____, A. D. 20_____

(Appellant Signature)

Notary Public

(To be completed by the Aldan Borough Zoning Board)

COMMENTS: _____

Appeal DENIED

By Zoning Board of Aldan Borough

Date: _____

(Returned to Appellant)

Appeal SUSTAINED

By Zoning Board of Aldan Borough

Date: _____

(Forwarded to Zoning Officer)