

AN OUTLINE OF THE  
PROCEDURE FOR FILING AN APPEAL  
WITH THE NEW SEWICKLEY TOWNSHIP  
ZONING HEARING BOARD

(Township Zoning Ordinance Number 162, Article 16, Section 16.6, Sub Section 3)

- A. File the completed application with the Township Secretary or the Zoning Officer.
- B. Pay the appropriate fee.
- C. The appeal shall be heard at a public meeting. Notice of this hearing shall be given in the local newspaper as provided by law.
- D. The Board shall give notice to all interested parties.
- E. The Township shall furnish all pertinent data for review as required.
- F. The Board shall decide each appeal within the time fixed by law and this decision shall become part of the public record.
- G. The Board shall file a copy of the decision with the Township Secretary within seven (7) calendar days of the date of the action.
- H. Any person or body aggrieved by a decision of the board may appeal to the court of common Pleas within thirty (30) days as provided by law.

DO NOT WRITE IN THIS SPACE. FOR OFFICE USE ONLY

Date Received \_\_\_\_\_ Date advertised \_\_\_\_\_

Hearing Date \_\_\_\_\_ Fee Paid - Receipt No. \_\_\_\_\_ Appeal No. \_\_\_\_\_

ZONING HEARING BOARD  
NEW SEWICKLEY TOWNSHIP

Applicant Name \_\_\_\_\_ Date \_\_\_\_\_

Present Mailing Address \_\_\_\_\_ Phone No. \_\_\_\_\_

Site Address \_\_\_\_\_

Zoning District \_\_\_\_\_ Tax Parcel No. \_\_\_\_\_

Zoning Permit Application No. \_\_\_\_\_

PROPERTY DESCRIPTION

Size of Lot \_\_\_\_\_ Dimension of Lot \_\_\_\_\_

No. of Family Units \_\_\_\_\_ Present Improvements \_\_\_\_\_

Present Use \_\_\_\_\_

Proposed Use \_\_\_\_\_

NATURE OF APPEAL

- \_\_\_\_ 1. Zoning Officer Determination
- \_\_\_\_ 2. Challenge: \_\_\_\_ Map \_\_\_\_\_  
 \_\_\_\_ Ordinance: Article \_\_\_\_\_ Section \_\_\_\_\_ SubSection \_\_\_\_\_
- \_\_\_\_ 3. Request for variance because of a physical circumstance, particular  
 to this property \_\_\_\_ Area \_\_\_\_ Set Back \_\_\_\_ Height \_\_\_\_ Use  
 Other \_\_\_\_\_
- \_\_\_\_ 4. Special Exception Authorization:  
 \_\_\_\_ Home Occupation \_\_\_\_ Conversion Apartment  
 \_\_\_\_ Agricultural Use \_\_\_\_\_  
 \_\_\_\_ Outdoor Recreation \_\_\_\_ Junk Yard
- \_\_\_\_ 5. Other \_\_\_\_\_

Why do you believe the Board should approve your request? \_\_\_\_\_

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

Has any previous application or appeal been filed in connection with these premises?     Yes \_\_\_\_\_ No \_\_\_\_\_

What is the applicant's interest in the premises affected?

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(owner, agent, lessee, etc.)

What is the approximate cost of the work involved? -----

Following are the names and addresses of owners of property within a distance of 300 feet from the exterior limits of the property involved in this appeal as shown by the latest assessment roll of the County of -----.

NAME

ADDRESS

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NOTE:     This application must be filled out in duplicate. The original shall be deposited with the Secretary of the Zoning Hearing Board and a copy with the Zoning Officer. A copy of the plan of real estate affected showing location and size of lot, the size of improvements now erected or proposed to be erected, or other change desired, together with any other information required by the Zoning Hearing Board must be attached to each copy of this application. If more space is required, attach a separate sheet to each copy of this application and make specific reference to the question being answered.

\* \* \*

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

Applicant Signature -----