

BOROUGH OF COKEBURG, WASHINGTON COUNTY  
ZONING HEARING BOARD APPLICATION

TYPE OF APPLICATION: \_\_\_\_\_ VARIANCE  
\_\_\_\_\_ USE BY SPECIAL EXCEPTION  
\_\_\_\_\_ APPEAL FROM DECISION OF ZONING OFFICER  
\_\_\_\_\_ VALIDITY CHALLENGE  
\_\_\_\_\_ OTHER \_\_\_\_\_

(Please Specify)

LOCATION OF PROPERTY \_\_\_\_\_  
COUNTY ASSESSOR'S TAX PARCEL NUMBER FOR PROPERTY \_\_\_\_\_

ZONING CLASSIFICATION \_\_\_\_\_ PRESENT USE OF PROPERTY \_\_\_\_\_  
EXISTING IMPROVEMENTS ON PROPERTY \_\_\_\_\_  
PROPOSED USE AND/OR IMPROVEMENTS ON PROPERTY \_\_\_\_\_  
APPROXIMATE COST OF PROPOSED IMPROVEMENTS \$ \_\_\_\_\_

LANDOWNER'S NAME \_\_\_\_\_  
LANDOWNER'S ADDRESS \_\_\_\_\_  
LANDOWNER'S PHONE NUMBER \_\_\_\_\_

APPLICANT'S NAME \_\_\_\_\_  
(If different from landowner) \_\_\_\_\_  
APPLICANT'S ADDRESS \_\_\_\_\_  
APPLICANT'S PHONE NUMBER \_\_\_\_\_

IF APPLICANT IS NOT LANDOWNER, EVIDENCE OF AUTHORIZATION TO ACT ON BEHALF OF  
LANDOWNER \_\_\_\_\_ ATTACHED \_\_\_\_\_ NOT APPLICABLE

SECTIONS OF BOROUGH ZONING ORDINANCE UNDER WHICH THIS APPLICATION IS FILED:  
\_\_\_\_\_

REASONS WHY THE ZONING HEARING BOARD SHOULD GRANT THE REQUEST:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Attach additional sheet, if necessary)

HAS A PRIOR APPLICATION BEEN FILED WITH THE BOARD FOR THIS PROPERTY? \_\_\_ YES \_\_\_ NO  
IF YES, GIVE DATE AND NATURE OF APPLICATION: \_\_\_\_\_

CONTENT OF APPLICATION:  
\_\_\_\_\_ PLOT PLAN OF PROPERTY  
\_\_\_\_\_ LIST OF NAMES AND ADDRESSES OF PROPERTY OWNERS WITHIN 300 FEET OF  
ENTIRE PERIMETER OF PROPERTY (INCLUDING ACROSS THE STREET) TAKEN  
FROM LATEST ASSESSMENT ROLL OF WASHINGTON COUNTY  
\_\_\_\_\_ EVIDENCE OF OWNERSHIP OF PROPERTY

APPLICATION FILING FEE: \$ \_\_\_\_\_ DATE PAID \_\_\_\_\_ CHECK # \_\_\_\_\_  
STENOGRAPHER'S APPEARANCE FEE: \$ \_\_\_\_\_ DATE PAID \_\_\_\_\_ CHECK # \_\_\_\_\_

I, \_\_\_\_\_, hereby depose and say that all the above statements and the  
statements contained in the materials submitted herewith are true and that I understand that I must  
abide by all applicable Borough Ordinances.

SIGNATURE OF APPLICANT: \_\_\_\_\_  
DATE: \_\_\_\_\_

(Official Use Only)

APPEAL NO. \_\_\_\_\_ HEARING DATE: \_\_\_\_\_ DATE OF DECISION: \_\_\_\_\_  
DECISION: \_\_\_\_\_ APPROVED \_\_\_\_\_ DENIED \_\_\_\_\_ APPROVED WITH CONDITIONS