

CRAFTON BOROUGH ZONING HEARING BOARD

100 Stotz Avenue
Pittsburgh, PA 15205

REQUEST FOR HEARING

Applicant Name: _____

Applicant Address: _____

Telephone: _____ Fax: _____

I/We hereby request that a determination be made by the Zoning Hearing Board on the following request:

1. Description of the property involved in this appeal:

Location _____

Property Owner _____

Block/Lot No.: _____ Lot Size _____

Present Use _____ Zoning District _____

Present Improvements on Land: _____

Proposed Use: _____

Approximate cost of work involved: _____

2. Provision(s) of the Zoning Ordinance Appealed:

Part	Section	Subsection
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3. Type of Appeal/Request:

- A. Variance from the provisions of the Zoning Ordinance
- B. Temporary Use Permit
- C. Non-Conforming Use Status
- D. Interpretation of the Zoning Ordinance or Map
- E. Special Exception Approval
- F. Other (explain) _____

4. Has a previous appeal been filed in connection with this property? Yes _____ No _____

If yes, _____ (Type) _____ (Date) _____ (Disposition)

5. Reason for Appeal: Description of Proposal

A. A Variance from the Zoning Ordinance is requested as follows: _____

_____ Use Variance _____ Dimensional Variance

NOTE: APPLICANT MUST PROVE THE FOLLOWING:

- (1) Strict application of current provisions would produce unnecessary hardship.
- (2) The unnecessary hardship is a result of unique physical conditions of the property.
- (3) The unnecessary hardship was not created by the applicant.
- (4) The character of the district/neighborhood would not change or be adversely affected.
- (5) The variance requested is the minimum necessary to afford relief.

B. Temporary Use Permit or extension thereof is requested as follows: _____

C. Non-Conforming Use Status is requested as follows: _____

D. Interpretation of the Zoning Ordinance or Map is requested as follows: _____

E. Special Exception Approval is requested as follows: _____

F. Other: _____

6. I/We believe the Board should approve this request because (include grounds for appeal or reasons both with respect to law and fact for granting the appeal, variance or special exception and, if hardship is claimed, state the specifics (attach additional sheet if necessary)):

7. Have you applied for a building permit? Yes ___ (Date _____) No ___ If no, why not

8. What is applicant's interest in property affected (Owner, Agent, Lessee, Etc.)? _____

(Provide copy of deed, lease, sales agreement or other contract proving interest in property)

9. Provide names and addresses of owners of properties adjacent to and/or directly across a street from the boundary of the property or properties affected by the hearing as shown by the latest assessment of Allegheny County.

1. _____	2. _____	3. _____
_____	_____	_____
_____	_____	_____
4. _____	5. _____	6. _____
_____	_____	_____
_____	_____	_____

NOTE: As part of this application, the applicant must provide seven (7) copies of this request along with seven (7) copies of a survey or scaled-drawing of the property affected. This survey or scaled-drawing must show the location and size of the subject lot, the size of improvements now erected and/or proposed to be erected, proposed use or other changes desired, together with any other information required by the Board.

An administratively incomplete application will be returned to applicant. An application will be considered administratively incomplete unless or until the appropriate application/hearing fee is paid in full, and all necessary documentation is provided to the Borough.

Any and all documents or drawings submitted as evidence or for review must be to reasonably accurate dimensions, no free-hand drawings will be accepted.

I/We hereby certify that all of the above information and submitted documentation is true and correct to the best of my/our knowledge.

Date: _____ Applicant Signature _____



OFFICIAL USE ONLY

Date Filed: _____	Borough File No.: _____
Hearing Fee Paid: _____	Date Fee Paid: _____
Date Advertised: _____	Date Property Posted: _____
Date Borough Building Posted _____	Date Notices Sent to Interested Parties: _____
Date of Hearing: _____	