PHONE (610) 777-1343 FAX (610) 796-0850

## **TOWNSHIP OF CUMRU**

BERKS COUNTY, PENNSYLVANIA 1775 WELSH ROAD MOHNTON, PA 19540

FOR OFFICIAL USE ONLY	{ APPLICATION NO	_}
	DATE FILED	_
	FEE PAID	_}

## NOTICE OF APPEAL OR APPLICATION TO THE CUMRU TOWNSHIP ZONING HEARING BOARD (To be filed in triplicate)

Appeal is here	eby made by the undersigned (check applicable item or items)
( )	from the determination of the Zoning Officer pertaining to Section of the Zoning Ordinance.
( )	from an enforcement notice dated
( )	for a variance from Section of the Zoning Ordinance.
( )	for a Special Exception permitted under Section of the Zoning Ordinance
	g Officer's decision: A copy of the zoning permit application and the state of the decision or enforcement notice is attached hereto.
APPELLANT_	(Name)
	(* *******)
-	(Address)
_	(Telephone Number)
OWNER	
	(Name)
_	(Address)
-	(Telephone Number)
ATTORNEY (	if any)(Name)
	()
	(Address)
_	(Telephone Number)

1. Interest of Appellant
( ) Owner by deed dated
( ) Equitable owner under Agreement of Sale dated
( ) Lessee under lease dated Lessee has permission of the owner of the property to preser this application.
( ) Other (explain)
Application relates to: (check applicable item or items)
( ) Use ( ) Lot Area ( ) Yards ( ) Height ( ) Sign
( ) Existing Building ( ) Proposed Building ( ) Other
Brief description of real estate affected:  Location: (specific location, with direction and distance from nearest intersection)
Lot Size:
Present Use:
Present Zoning Classification
Present improvements upon the land
4. If this is an appeal from action of the Zoning Officer, specify the alleged error of the Zoning Office
5. Describe the relief desired by Appellant:

6.	Describe the reasons Appellant believes Board should approve desired action (refer to action or sections of Ordinance under which it is felt that desired action may be allowed, and note whether hardship is [or is not] claimed, and the specific hardship).
7.	Has a previous appeal been filed in connection with these premises?
If yes,	list the following:
Date o	f prior Zoning Hearing Board decision:
Name	of Applicant in prior decision:
Relief	granted in prior decision:
NOTE:	Attach two copies of plan of real estate affected, drawn to scale and with a north arrow, indicating location and size of improvements now erected and proposed to be erected thereon, or other change desired, also any other information required by the Zoning Hearing Board. If more space is required, attach a separate sheet and make specific reference to the question being answered. In question 5 above, include the grounds for the appeal or reasons both with respect to law and fact for granting the appeal or the special exception or variance. Specifications or errors must state separately the appellant's objections to the action of the Zoning Officer with respect to each question of law and fact which is sought to be reviewed.
CONT	EBY DEPOSE AND SAY THAT ALL OF THE ABOVE STATEMENTS AND THE STATEMENTS AINED IN ANY PAPERS OR PLANS SUBMITTED HEREWITH ARE TRUE TO THE BEST OF MY LEDGE AND BELIEF.
DATE:	
	(Appellant)
	(Appellant)