

Submission deadline date: _____ Fee Due: \$ _____

APPLICATION FOR AMENDMENT TO ZONING ORDINANCE

To the Board of Supervisors

1. Name of Applicant: _____
Address: _____
 (Street) (City) (State) (Zip Code)
Home Phone: _____ Business Phone: _____
2. Name of Owner: _____
Address: _____
 (Street) (City) (State) (Zip Code)
Home Phone: _____ Business Phone: _____
3. Name of Attorney: _____
Address: _____
 (Street) (City) (State) (Zip Code)
Business Phone: _____ E-mail address: _____
4. The subject property is located as follows, include street address, tax parcel number, and a narrative of the general location:

5. Existing use of land and/or buildings: _____

6. Proposed use of land and/or buildings: _____

7. Proposed zoning amendment (**list the section of the ordinance to be amended, narrative of amendment, and include a site plan of the property**): _____

NOTE: The site plan must include property lines, lot dimensions, proposed and existing building(s), front, side and rear setback lines, off-street parking areas, and existing use of abutting properties.

(Date submitted)

(Signature of Applicant)

(Date)

(Signature of Owner)

OFFICE USE ONLY

Date received: _____ Fee Paid: \$ _____ Case No. _____
Date of Board of Supervisors Meeting: _____ Date of Planning Commission Meeting _____
Date Sent to Dauphin County Planning Commission for Review: _____ Comments Received _____
Publication date: _____ Newspaper: _____ Date of Hearing: _____