



BOROUGH OF HOP BOTTOM
SUSQUEHANNA COUNTY, PENNSYLVANIA
ZONING HEARING APPLICATION

Type of Application (check one):

Variance Special Exception Appeal

Applicant Information

Name: _____

Address: _____

Phone: _____

Email: _____

Property Information

Property Address: _____

Parcel Number (Tax ID): _____

Zoning District: _____

Description of Request

Provide a detailed description of the requested variance, special exception, or appeal:

VARIANCE CRITERIA (REQUIRED FOR VARIANCES ONLY)

To be completed for variance requests, the applicant must address the following:

1. Unique Physical Circumstances

Describe the unique physical conditions of the property (such as irregularity, narrowness, shallowness, or topography):

2. Unnecessary Hardship

Explain how these conditions create an unnecessary hardship if the ordinance is strictly applied:

3. No Possibility of Development in Conformity

Explain why the property cannot be developed in strict conformity with the zoning ordinance:

4. Hardship Not Self-Created

Explain how the hardship was not created by the applicant:

5. Minimum Variance

Explain how the requested variance is the minimum necessary to afford relief:

6. No Detriment to Public Welfare

Explain how the variance will not alter the essential character of the neighborhood or be detrimental to public welfare:

Additional Information (Optional)

Signature

Applicant Signature: _____

Date: _____



Borough Use Only

Date Received: _____

Fee Paid: _____

Hearing Date: _____

Decision: _____