## BOROUGH OF TOWANDA CODE ENFORCEMENT OFFICE

724 Main Street, PO Box 229 Towanda PA 18848 (570) 265-2696

## APPLICATION TO THE ZONING HEARING BOARD

(Please print or type)

1.	Application for:   Variance
	□ Special Exception
	□ Interpretation
2.	Name and Address of Applicant
3.	Name and Address of Owner of Property
4.	Description and Address of Property to be affected by proposed change
5.	Zoning Classification of Property
6.	Present Use of Property
7.	Proposed Use of Property
8.	Applicable Zoning Ordinance Section(s)
9.	Reasons Application should be granted
10.	Description of Improvements and/or use; General Construction thereof
11.	Attach Plot Plan of Property, indicating size of lot and location and size of improvements thereon.
12.	The undersigned do(es) hereby make Application to the Zoning Hearing Board as indicated and testify that the information contained herein is true and correct.
Signed:	
\$	Filing fee received, Date by