

Date Hearing Advertised _____ Appeal No.: _____

Fee Paid – Check No. _____ Date: _____

LOWER MAKEFIELD TOWNSHIP

ZONING HEARING BOARD

Township of Lower Makefield, Bucks County, Pennsylvania

NOTICE OF APPEAL / APPLICATION

Appeal/Application is hereby made by the undersigned to the Lower Makefield Zoning Hearing Board as follows:

Check Applicable Item(s):

- Application for Challenge to the Validity of Ordinance.
 - Appeal from Determination of Zoning Officer dated _____, 20__.
 - Application for Special Exception or Variance from the terms of the Zoning Ordinance.
-

Appellant: Name:
 Address:

 Phone: Email:

Owner: Name:
 Address:

 Phone: Email:

Attorney: Name:
(if any) Address:

 Phone: Email:

Interest of appellant, if not owner (agent, lessee, etc.):

1. Application Relates to:

Check Applicable Items(s):

- | | |
|--------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Use | <input type="checkbox"/> Lot Area |
| <input type="checkbox"/> Height | <input type="checkbox"/> Yards |
| <input type="checkbox"/> Existing Building | <input type="checkbox"/> Proposed Building |
| <input type="checkbox"/> Occupancy | <input type="checkbox"/> Challenge |
| <input type="checkbox"/> Other: _____ | |

2. Brief Description of Real Estate Affected:

Tax Parcel No.: _____
Location: _____
Lot Size: _____
Present Use: _____
Present Zoning Classification: _____
Present Improvements Upon Land: _____
Present Status of Water and Sewer Service to Property: _____
Date of Acquisition of Property: _____

3. Describe proposed use of property, the approval of which is sought by this appeal.

4. If this is a challenge to the validity of the Ordinance, state in detail the basis for the challenge to the validity to the Zoning Ordinance.

5. If this is an appeal from a determination of the Zoning Officer, complete the following:

Date determination was made: (Attach copy of written Determination of Zoning Officer appealed from.) _____

Your statement of alleged error of Zoning Officer:

6. If this is an application for special exception or variance, state the specific section of the Zoning Ordinance upon which the special exception is based or from which a variance is being requested.

7. Action desired by appellant or applicant (statement of relief sought or special exception or variance desired):

8. Reasons why this request for relief should be granted. (Include the grounds for appeal or reasons both with respect to law and fact for granting the appeal or special exception and/or variance, and if hardship is claimed, state the specific hardship.)

9. Has previous appeal or application for special exception or variance been filed in connection with the property?

 Yes No

10. What is the approximate cost of the work proposed? _____

NOTE:

The copy of the application must be accompanied by a plan of the real estate affected, indicating location and size of lot, size of improvements now erected and proposed to be erected thereon, or other change desired. (Also attached must be copy of Deed for property, if needed).

If more space is required, attach a separate sheet to each copy of this application and make specific reference to the question being answered.

Specifications of 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.

I, hereby certify that all of the above statements and the statements contained in any papers or plans submitted herewith, are true and correct to the best of my knowledge and belief.

SWORN TO AND SUBSCRIBED BEFORE ME THIS ___day of _____, 20__.

Notary Public

Appellant

NOTE: A breakdown of expenses incurred and refund of monies, if applicable, will be done within 8 – 12 weeks from the date of the decision. Please complete below to whom a refund should be sent.

NAME

ADDRESS

CITY, STATE , ZIP CODE

DAYTIME PHONE NUMBER (WORK)

(HOME PHONE NUMBER)



Township of Lower Makefield

Zoning Hearing Board

GUIDELINES FOR MAKING APPLICATION

1. NOTICE OF APPEAL/APPLICATION

- A. Application for a [Special Exception](#), [Variance](#), [Appeal from the Determination of the Zoning Officer](#) and [*Challenging the Validity of the Township Zoning Ordinance](#) and its amendments may be taken to the [Zoning Hearing Board](#) by any person aggrieved or affected by any decision of the Zoning Officer of Lower Makefield Township. The applicant or appellant shall file his or her Notice of Appeal/Application, on the forms provided, within 30 days after the date of the decision of the Zoning Officer.
- B. Fill out one (1) copy of the Notice of Appeal/Application form and have same notarized. If more space is required, attach a separate sheet to each copy and make specific reference to the question being answered.

The Township shall notify the adjoining property owners of the public hearing. (The latest tax parcel information available to the Township will be used.)

2. FEES

- A. Each Application shall be accompanied by a deposit of \$750.00 for residential, of which \$500.00 shall be considered the filing fee and shall be non-refundable. For non-residential Appeals a deposit of \$1,250.00, of which \$750.00 shall be considered the filing fee and shall be non-refundable. In both cases, the additional amount shall be utilized to pay costs associated with advertising, mailing, stenographic services and other costs incurred by Lower Makefield Township in connection with the application. Checks shall be made payable to "Lower Makefield Township".

* Applications Challenging the Validity of the Township Zoning Ordinance shall be accompanied by the payment of \$3,500.00, of which \$2,000.00 shall be considered a filing fee and shall be non-refundable. The additional \$1,500.00 shall be utilized to pay costs associated with advertising, mailing, stenographic services and other costs incurred by Lower Makefield Township in connection with the application. Checks shall be made payable to "Lower Makefield Township".

Any unused funds shall be returned to the applicant or, the applicant will be billed for any additional expenses beyond the required escrow amount for Special Exception, Variance or Appeal and for Challenging the Validity of the Township Ordinance.

- B. The Township may also, from time to time, require additional deposits on any Application where it is determined by the Township Manager that the funds currently on deposit will not be sufficient to cover the cost for engineering services, legal advertising, secretarial services, postage expense, and other miscellaneous expenses.

3. **SITE PLANS**

- A. Each Application shall be accompanied by eleven (11) copies and one (1) electronic copy (PDF) of a site plan prepared in sufficient detail to describe the current and proposed use of the property. The plan must show the dimensions and the setbacks to the property line(s) for all existing construction/structures, including driveway(s), walkway(s), patio(s), deck(s), etc. as well as the proposed construction. Additionally, easements and/or natural resources may also need to be identified on said site plan, if applicable. If the application involves a variance request for impervious surface, then impervious surface calculations are required as part of the application submission.

4. **CONSTRUCTION DRAWINGS**

Construction drawings may be required by the Township. This determination is to be made by the Township or the Zoning Hearing Board after consultation with the applicant.

SUMMARY REQUIREMENTS

1. Initial payment of \$750.00 for residential applications, \$1,250.00 for non-residential applications or \$3,500.00 for Applications Challenging the Validity of the Zoning Ordinance.
2. One (1) copy of the Notice of Appeal/Application form notarized.
3. Eleven (11) copies and one (1) electronic copy (PDF) of the Site Plan(s).
4. Impervious surface calculations (if applicable).
4. *Construction Drawings (if applicable).

Under the Lower Makefield Township Zoning Ordinance, Section [200-103](#), the parties in interest shall be notified of the decision by the Zoning Hearing Board within forty-five (45) days after the hearing. **IT IS NOT NECESSARY TO CONTACT THE MEMBERS OF THE BOARD OR THE TOWNSHIP PRIOR TO THAT TIME FOR ADVANCE INFORMATION OF THE FINAL DECISION. NO INFORMATION CONCERNING THE CASE WILL BE GIVEN UNTIL AFTER THE ZONING HEARING BOARD DECISION HAS BEEN RECEIVED BY THE APPLICANT.**

Any person aggrieved by any decision of the Zoning Hearing Board, may within thirty (30) days after such decision of the Board, file an appeal to the Court of Common Pleas of Bucks County. Such appeals shall be made in accordance with Article X-A of the [Pennsylvania Municipalities Planning Code](#), as amended.