EAST STROUDSBURG BOROUGH

24 Analomink Street East Stroudsburg PA 18301 (570) 421-8300 (phone) (570) 421-5575 (fax)

APPLICATION TO THE ZONING HEARING BOARD

Date:	Fee Paid:	ZH	B #
Applicant:			
Mailing Address:			
Phone Number:		(day)	(eve)
Property Owner:			
Mailing Address:			
Legal Counsel (if an	y):		
Mailing Address:			
Location of Property	7:		
Tax Map#:			
Present Use:			
Action requested, cit Exception, Variance		s) of Zoning Ordinance (Ap	peal, Special Use or
Reason for request (include hardship if requ	esting Variance):	
		Applicant's Signat	ure
		Try nount 5 Signat	

Notes: For an Appeal, attach a true copy of the order or decision of the Zoning Officer.

Please read the Zoning Hearing Board Application Submission Checklist and Information Sheet for the recommended materials to be attached to and for what should be brought to the Hearing for presentation. A site plan detailing the dimensions of work, location of the proposed work, existing structures, property lines, distance from property lines, size of existing structures, proposed and existing parking lighting, landscaping, signage, a north arrow and other items recommended by the Zoning Officer must accompany the application when applicable. Additional site plan recommendations are on the Submission Checklist and Information Sheet.

The application fee must be paid at the time of submission of the application.

If the applicant is other than the property owner, a letter of permission must be included with this application. All information submitted shall become part of the record and cannot be returned to the applicant.