Borough of Marysville 200 Overcrest Road Marysville, PA 17053 717-957-3110

Zoning Hearing Board Appeal Application

1.	Name of Applicant:					
	Address:					
	Phone Numbers:	Home	Cell	Work		
2.	Name of Owner:					
	Address:					
	Phone Numbers:	Home	Cell	Work		
3.	Name of Attorney:					
	Address:					
	Phone Numbers:	Home	Cell	Work		
4.	The subject property is located as follows: (street address, tax parcel number and a narrative of general location):					
5.	The request for an appeal is for (check the appropriate category):					
	Interpretation: Variance: Use Variance: Substantive Challenge to Validity of Ordinance:					
	Special Exception					
	Appeal of Zoning Officer's decision NOTE: Interpretation appeals must be accompanied by a narrative describing reasons for appeal and a copy of the Zoning Officer's decision in accordance with Section 1001.4.					

Substantive Challenge to Validity of Ordinance must be accompanied by a narrative describing the reason the ordinance should be considered invalid in accordance with Section 1002.

Variance or Use Variance appeals must be accompanied by a narrative describing hardship in accordance with Section 1001.5 and a site plan. See attached sample site plan.

. Section of the Zoning Ordinance for which an				
7. Zoning district of property in questions:				
ite plan must be submitted for appeals involving setbacks, lot area, signs, height, or land racteristics.				
Signature of Applicant		Date Submitted		
Signature of Owner		Date		
OFFICE USE ONLY				
Date Received:	Fee Paid:			
Case Number:				
Date of Zoning Hearing Board Meeting:				
Date of Planning Commission Meeting:				
Publication Date:				
Newspapers:				
Property Owners Notices Date Mailed:				
Date, Time and Place of Hearing:				
Action Taken:				