

Milford Township
2100 Krammes Road
P.O. Box 86
Spinnerstown, PA 18969
V(215) 536-2090 - F(215)
529-9127

Office Use Only Tax Parcel #: _____ District: _____ Date Rcvd: _____ Mtg Held On: _____
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Milford Township Application for Hearing before the Zoning Hearing Board

Owner's Name(s): _____ Phone (H): _____
Mailing Address: _____ Phone (W): _____

Location of Property: _____
Present Use of Property: _____
Proposed Use or Change: _____

.....
Note: Fill in only those sections below that apply. Photographs and other documentation may be submitted with this application to help present your case.

() Variance — *(Include with application: one (1) copy of deed of title, six (6) copies of plot plan showing existing and proposed structures, six (6) copies of floor plans and elevations, if applicable, and full application fee).* Under Section 1106 of the Milford Township portion of the Quakertown Area Zoning Ordinance I request a variance from Section(s) _____ of the Zoning Ordinance as follows:

() Special Exception — *(Include with application: one (1) copy of deed of title, seventeen (17) copies of plot plan showing existing and proposed structures, seventeen (17) copies of floor plans and elevations, if applicable, and full application fee).* Under Section 1107 of the Milford Township Portion of the Quakertown Area Zoning Ordinance I request a Special Exception under Section(s) _____ of the Zoning Ordinance as follows:

() **Interpretation** — *(Include with application: one (1) copy of deed of title, six (6) copies of plot plan showing existing and proposed structures, six (6) copies of floor plans and elevations, if applicable, and full application fee).* Under Section 1105 of the Milford Township Portion of the Quakertown Area Zoning Ordinance I request an Interpretation of Section(s) _____ of the Zoning Ordinance as follows:

() **Validity** — Under Section 1111 of the Milford Township Portion of the Quakertown Area Zoning Ordinance I challenge the Validity of Section(s) _____ of the Zoning Ordinance as follows:

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I hereby certify that the above statements and the statements contained in any paper or plans submitted herewith are true and correct to the best of my knowledge and belief. I certify that to the best of my knowledge, the property for which I seek zoning relief is in compliance with the requirements and standards of the above named section(s) of the Zoning Ordinance and any other requirements of law. I further certify that I am authorized by all owners to make this application. I authorize township officials and/or engineers to enter this land for site inspections.

Signature of Applicant: _____ Date: _____

Application and fee of \$_____ received by Milford Township Zoning Officer or authorized representative.

Signature of township official: _____ Date: _____

<u>Zoning Hearing Board Fee Schedule:</u>	
Residential (Single-family)	\$250
Multi-family (2 to 6 units)	\$500
Multi-family (7 or more units)	\$1,000
Institutional & recreational	\$750
Non-Conforming Use Change	\$350
Commercial & Industrial	\$1,500
Validity Challenge	\$10,000