



# BENSALEM TOWNSHIP

Building and Planning Department  
 2400 Byberry Road • Bensalem PA 19020  
 215-633-3644 • FAX 215-633-3653

## CHECK OFF LIST FOR ZONING HEARING BOARD APPEAL

The items listed below are **requirements** of the application process for the Zoning Hearing Board.

Check off the items that accompany this appeal. If item is deemed not applicable put N/A in place of a check mark. If any box is not marked with either a check mark or N/A, the application will be considered incomplete and will not be accepted.

<input type="checkbox"/>	13 copies of Appeal (pages 4 thru 6)
<input type="checkbox"/>	13 copies of Plot Plan
<input type="checkbox"/>	13 copies of Zoning Officers rejection
<input type="checkbox"/>	13 copies of Tax Map
<input type="checkbox"/>	13 copies of deed
<input type="checkbox"/>	13 copies of agreement of sale or lease agreement
<input type="checkbox"/>	13 copies of detailed plan of proposed structure
<input type="checkbox"/>	13 copies of deed searches if your application is for certification of non-conforming use
<input type="checkbox"/>	13 copies of exhibits which would include but are not limited to pictures, diagrams, and changes.
<input type="checkbox"/>	Application must be notarized. Original must be submitted.
<input type="checkbox"/>	Applications and all required material as described must be placed in packet form as follows:
	Appeal
	Plot plan
	Zoning officers rejection
	Tax map
	Deed
	Agreement of sale or lease agreement if applicable
	Detailed plan of proposed structure
	Deed searches, if applicable
	Exhibits
<input type="checkbox"/>	Notify all adjoining owners by certified mail. Township will provide a list of adjoining properties. to be notified)

The Zoning Hearing Board Clerk is not authorized to fill out your Zoning hearing Board application, correlate the above items or answer technical questions. If you are not sure how to go about appealing to the zoning hearing board, it is advised that you obtain an attorney to help you.

Attached to this checklist is the appeal and instructions on how to fill out the appeal form.

Plot plans may be hand drawn as long as all information is accurate. It must contain all pertinent zoning information. It must contain the names, addresses and tax parcel numbers of all adjoining owners.

To obtain the Zoning Officers rejection notice you must first submit an application or occupancy permit. You will receive your rejection notice in the mail.

Tax maps may be obtained either in Doylestown at the courthouse or in the township building. In order for us to provide you with a copy your tax map, you will need your tax parcel number from your tax bills the courthouse telephone number is 215-355-7497. Ask for tax mapping.

You can obtain a copy of your deed from the Recorder of Deeds office in Doylestown.

A detailed plan means a plan that shows what you are building.

For deed searches of adjoining owners' properties, you can obtain these at the Recorder of Deeds office in Doylestown.

Notarization. Have the first copy notarized and when you make copies of that form the notarization will show up on all the copies. Submit all copies plus the original.

**Important: the Zoning Hearing Board requires submission of proof of notification, of adjoining property owners before appeal can be heard. This is also a requirement of the Pennsylvania Municipalities Planning Code for appeals to the Zoning Hearing Board.**

**Note: The Township will post a zoning notice in a conspicuous place in front of the premises seven (7) days preceding the hearing.**

## **How To Complete A Zoning Hearing Board Application**

### **DEFINITIONS**

**Application for Challenge:** Check this item if you intend to challenge the validity of the zoning ordinance, the zoning map, or any provisions thereof which prohibits or restricts the use or development of land in which the appellant has an interest.

**Application from the Administrative Officer is refusing my application for a building permit:** Check this item if you think the Zoning Officer acted improperly or in error in refusing your building permit.

**Application for Special Exception:** Check this item in cases where the zoning ordinance states that special exceptions may be granted or denied by the Zoning Hearing Board.

**Application for variance:** Check this item when you require a variance from the zoning ordinance in order to build on your property. This may be a variance from setbacks, size of property, use of property, etc. You must prove a hardship and that such hardship was not created by the Appellant.

**Application for certification of a non-conforming use/lot:** Check this item if the property has existed as a non-conforming use or a non-conforming lot, in single and separate ownership, continuously since prior to 1954 to the present time.

**Appellant:** The individual applying for the appeal. The Appellant must have a vested interest in the property (owner, lessee, or equitable owner).

**Attorney:** Please provide this information if an attorney is involved.

**Interest of Appellant if not Owner:** Lessee or equitable owner.

**Instructions for questions 1 through 8:**

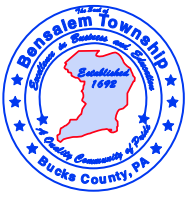
1. Check all items that apply to your application and that you want considered by the Zoning Hearing Board.
2. Description information:
  - **Tax parcel number:** this information can be found on your tax bills; at the bucks county court house; or by researching this information at the township building. You must know the owner of record to find this information.
  - **Location:** The address of the property for which you are applying for an appeal. This includes a street number. If no street number exists, supply the lot number and the street name.
  - **Lot size:** What are the dimensions of the lot.
  - **Present use:** What is the use of the property at this time.
  - **Present zoning classification:** This information may be obtained by applying to the Zoning Officer for a zoning certification or by looking it up on our zoning map at the office of the Bensalem Township Department of Building and Planning.
  - **Present improvements upon land:** What is on the land now? House, garage, shed, etc. List everything that currently exists on the property. If nothing is on the land state "none".
  - **Deed recorded in Doylestown:** What are the deed book number and page number(s) of this property? This information can be found on your deed or at the office of the recorder of deeds in Doylestown.
3. What is your basis for challenge? Why do you think the zoning ordinance or zoning map prohibits or restricts your use or development of the land?
4. On what basis did the Zoning Officer issue the rejection? Why do you think the Zoning Officer was in error?
5. List the articles and section numbers of the zoning ordinance you are appealing. This information will be found on the "notice of rejection" form.
6. List the type of action for which you are applying:
  - are you applying for a variance? If yes, for what are you requesting a variance.
  - are you applying for a special exception? If yes, describe the special exception for which you are applying.
  - what is the relief you require from the Zoning Hearing Board?

**NOTE:**

If more space is required, attach a separate sheet and make specific reference to the questions being answered.

In question #6, above, include the grounds for the appeal or reasons, both with respect to law and fact for granting the Appeal or special exception or variance.

7. Using your own words: Describe why you feel the Zoning Hearing Board should approve your appeal.
8. In the past, have you ever applied for an appeal before the Zoning Hearing Board for this property?



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Exhibit Z-4

## Zoning Hearing Board

**Appeal Number:** \_\_\_\_\_

### Township of Bensalem, Bucks County, Pennsylvania Notice of Appeal

Appeal is hereby made by the undersigned from the action of the Zoning Officer.

**Check applicable item(s):**

- Certification of Non-Conforming Use
- Application for Validity Challenge
- Administrative Officer in refusing my application for a building permit dated: \_\_\_\_\_
- Special Exception
- Variance from the terms of the Zoning Ordinance of the Township of Bensalem

**Appellant Name:** \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_

**Owner's Name:** \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_

**Attorney Name:** \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone No. \_\_\_\_\_  
\_\_\_\_\_

Interest of appellant, if not owners (agent, lessee, etc.): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**1. Application relates to the following:**

**Check items if applicable:**

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

**2. Brief description of Real Estate affected:**

Tax Parcel Number: \_\_\_\_\_

Location: \_\_\_\_\_

Lot Size: \_\_\_\_\_

Present Use: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Present Zoning Classification: \_\_\_\_\_

Present Improvement upon Land: \_\_\_\_\_

Deed recorded at Doylestown in Deed Book \_\_\_\_\_ Page \_\_\_\_\_

**3. If this is an appeal to challenge, provide statement and/or basis for challenge to the validity of the zoning ordinance.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**4. If this is an Appeal from action of the Zoning Administrative Officer then complete the following:**

Date Determination was made: \_\_\_\_\_

Your statement of alleged error of Zoning Administrative Office: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Specific reference to section of the Zoning Ordinance upon which application for special exception or variance is based (if special or variance is desired):

\_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

7. Reasons appellant believes board should approve desired action (refer to section or sections of ordinance under which it is felt that desired action may be allowed, and not whether hardship is (or is not) claimed, and the specific hardship.

\_\_\_\_\_

\_\_\_\_\_

8. Has previous appeal or application for special exception or variance been filed in connection with these premises?

YES  NO

Specifications of errors must state separately the appellant's objections to the action of the zoning administrative office with respect to each question of law and fact which is sought to be reviewed.

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

\_\_\_\_\_  
Appellant's or Owner's Signature

\_\_\_\_\_  
Date

Sworn to and subscribed before me this

\_\_\_\_\_ day of

\_\_\_\_\_ 200

Notary Public

My commission expires: \_\_\_\_\_