

**APPLICATION FOR A ZONING PERMIT OR APPEAL
REQUIRING ACTION BY THE ZONING HEARING BOARD**

New Milford Borough, Susquehanna County, Pennsylvania

Type of action required (check one): Exception _____ Variance _____
Fee: \$400.00 Appeal _____ Interpretation _____
(payable to New Milford Borough)

1. The name and address of (Appellant) (Applicant): _____

2. The name and address of (Appellant's) (Applicant's) Attorney: _____

3. The interest of (Appellant) (Applicant): _____

4. If interest is other than "owner" furnish name and address of owner: _____

5. Description and location of the affected lot: _____

6. The present zoning district classification:

7. Listing of improvement on the lot (structures, roadways, etc.): _____

8. Present use of the lot: _____

9. A map or diagram detailing the current lot with current and proposed improvements is attached: YES _____ NO _____ (NOTE: Boundary dimensions must be to roadway legal rights-of-way.)

10. Structure height: _____ Stories (_____ feet) measured from the average level of the site covered by the structure to the ceiling of the uppermost story.

11. The following dimensions and / or specific data necessitates to action sought: _____

12. Sections of the Zoning Ordinance applicable to this request: _____

13. Names and addresses of all those persons owning property adjoining or across adjoining streets from the property: _____

14. Number of attached pages of maps, diagrams, data, comments: _____

Date _____

Signature of Applicant/Appellant

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Date received: _____

Received by _____ Per _____

Date Published: _____

Hearing Date: _____

Referred to Planning Commission: _____

Order of Hearing Board: _____

For Zoning Hearing Board & Title

Date