

UPPER NAZARETH TOWNSHIP
NAZARETH, PENNSYLVANIA

FOR OFFICE USE
ONLY:

Case #:
Hearing Date:
Fee: \$
☐ Approved
☐ Denied
Permit #:

*100 Newport Avenue * Nazareth * Pennsylvania 18064 * 610-759-5341 * FAX 610-759-4430

ZONING APPEAL APPLICATION

APPLICANT:

1. Name: _____
2. Company Name (if applicable): _____
3. Address: _____
4. Home Phone #: _____ Office Phone #: _____
Fax #: _____ Mobile #: _____

PROPERTY:

5. Zoning District: (circle one) R-1 (Residential) NC (Mixed Use) I (Industrial)
O/I (Office/Industrial) FP (Floodplain) Other
Corner Lot: ☐ Yes ☐ No (Corner lots are required to meet the front setbacks on both streets.)
6. Deed Owner's Name: _____
7. Deed Owner's Address: _____
8. Deed Owner's Home Phone #: _____ Office Phone #: _____
Fax #: _____ Mobile #: _____
9. Property Address: _____
10. Deed Reference #: _____ Parcel #: _____ Block #: _____ Lot #: _____
11. Present Use of Property: _____

SITE DATA:

12. Setbacks (ft.)
Front _____ Sides _____ Rear _____
13. Sewer System
☐ Septic ☐ Public
14. Water System
☐ Well ☐ Public
15. Borough Road

☐ Yes ☐ No

16. Has any previous zoning appeal been filed in connection with this property?

☐ Yes ☐ No

If Yes:

Applicant's Name: _____

Date of Appeal: _____

Nature of Appeal: _____

17. Type of appeal sought:

☐ Variance

☐ Special Exception

☐ Interpretation of Zoning Ordinance

☐ Enforcement Notice

☐ Other: _____

RELIEF REQUESTED:

*Cite the specific section(s) from the Upper Nazareth Township Zoning Ordinance from which you are seeking relief and a description of **relief requested**. (Please note that if this section is not complete, the appeal will not be heard.)*

18. Article # _____ Section # _____ Subsection # _____

Ordinance Citation

Article # _____ Section # _____ Subsection # _____

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Article # _____ Section # _____ Subsection # _____

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Article # _____ Section # _____ Subsection # _____

Ordinance Citation

19. State in narrative form the nature of your appeal, including the relevant facts to be presented to the Zoning Hearing Board. (Please attach additional sheets as necessary.)

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21. Are there any additional state, federal or other permits required?

If yes:

Please provide the list of permits required.

22. What will the impact of this use be on existing traffic patterns and volumes for this Zoning Appeal?

or district in which the property is located, nor substantially or permanently impair the appropriate use or development of adjacent property, nor be detrimental to the public welfare.

- π That in the case where the property in part or totally is located within the regulatory floodway, the granting of a variance will not increase the base flood elevation:
- π That the variance, if authorized, will represent the minimum variance that will afford relief and will represent the least modification possible of the regulation in issue.

ATTACHMENTS:

26. The following must accompany the application:

- π Legal Description of Property (Use www.ncpub.org)
- π Authorization from Owner (*If applicant is not the owner*)
- π Proof of Ownership
- π [Property Owners List](#)
- π Application Fee

SITE PLAN: (*The site plan must be submitted with the application.*)

27. The site plan shall include the following:

- π A North arrow and scale
- π Existing structures and dimensions
- π Driveway and road access locations (existing and/or proposed)
- π Proposed structures and dimensions
- π All setbacks
- π Roads
- π Lot dimensions
- π Easements and details
- π Locations of septic/public sewer and water lines
- π Indicate location of floodplain (if applicable)
- π All slopes

APPLICANT CERTIFICATION:

28. The undersigned states that the above information is true and correct to his/her knowledge.

Applicant's Signature

Date

23. What will the impact of this use be on existing stormwater infrastructure?

- o Has a stormwater engineering study been done that complies with Act 167?
- o Has this plan been submitted to the Lehigh Valley Planning Commission for their review?
- o Has the stormwater grading plan been reviewed by the Northampton County Conservation District, if applicable?

24. What will the impact of this use be on existing sewage or water infrastructure?

- o Does this project comply with Act 537?

o An engineering study and plan may be required prior to the submission of this appeal for sewer and water supplied.

REQUIRED HARDSHIP(S): *(Select all that apply)*

25. The Board shall hear and decide requests for variances where it is alleged that the provisions of this Ordinance inflict unnecessary hardship on the applicant. The Board may by rule prescribe the form of application as provided by Section 14-3. The Board may grant a variance provided the following findings are made where relevant in a given case.

- π That there are unique physical circumstances or conditions, including irregularity, narrowness or shallowness of lot size or shape, or exceptional topographical or other physical conditions peculiar to the particular property, and that the unnecessary hardship is due to such conditions, and not the circumstances or conditions generally created by the provisions of the Zoning Ordinance in the neighborhood or district in which the property is located. -
- π That because of such physical circumstances or conditions, there is no possibility that the property can be developed in strict conformity with the provisions of the Zoning Ordinance and that the authorization of a variance is therefore necessary to enable the reasonable use of property.
- π That such unnecessary hardship has not been created by the applicant.
- π That the variance, if authorized, will neither alter the essential character of the neighborhood

(Name and tax mailing address of all properties within 200 feet on the same street and properties within 200 feet not on the same street.)

ADDRESS

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AUTHORIZATION FROM OWNER

(If applicable)

STATE OF PENNSYLVANIA)
NORTHAMPTON COUNTY) SS:

I, _____, AFTER BEING DULY SWORN, DEPOSE AND
(Name of property owner(s))

SAY THE FOLLOWING:

1. That I am the owner of real estate located at _____;
2. That I have read and examined the Application made to the Upper Nazareth Township Zoning Hearing Board by

(Name of Applicant)
3. That I have no objections to and consent to the request(s) described in the Application made to the Upper Nazareth Township Zoning Hearing Board.

Owner's Name (please print)

Owner's Signature

Sworn to and ascribed before me this _____ day of _____ 20_____.

Notary Public

(seal)

My Commission Expires: _____