

NOTICE OF APPEAL

Do not write in this space. For office use only.
Date hearing Advertised: _____ Appeal No. _____
Fee Paid: _____ Receipt No.: _____

ZONING HEARING BOARD
TOWNSHIP OF MARPLE

Phone: _____ email: _____ Date: _____

I/We _____ of _____
Name Mailing Address

Request that a determination be made by the Zoning Hearing Board on the following appeal, which was denied by the Building Inspector on _____, 20____.

- [] An Interpretation [] A Special Exception [] A Variance relating to the [] Area [] Frontage
[] Yard [] Height [] Use or (state, if request is for purpose other than those enumerated)

Is requested to

Article _____ Section _____ Paragraph _____

Article _____ Section _____ Paragraph _____

Article _____ Section _____ Paragraph _____

The description of the property involved in this appeal is as follows:

Location: _____

Present Use: _____ Zone District: _____

Proposed Use: _____

I/We believe that the Board should approve this request because: (include the grounds for appeal or reasons both with respect to law and fact for granting the appeal or special exception or variance, and if hardship is claimed, state the specific hardship)

Sworn to and subscribed before me this _____
Day of _____ 20 _____.

Signature of Petitioner

Notary Public

Signature of Petitioner