



TOWNSHIP of LIGONIER

NOTICE OF APPEAL Zoning Hearing Board

Name of appellant _____

Address _____ Phone _____

Email _____

Location _____ Tax Map No. _____

Present improvements upon property _____

Proposed Use _____

Lot Size _____ Zoning District _____ Present Use _____

Date, circumstances and Appeal No. of any prior application affecting this property

I/We _____, owner(s) or agent for owner(s) of the property identified above do hereby request a determination be made by the Ligonier Township Zoning Hearing Board on the following:

- Request for an interpretation of the Zoning Ordinance or Zoning Map
- Appeal from the determination of the Zoning Officer
- A special exception in accordance with the terms of the Zoning Ordinance
- A dimensional variance as more specifically set forth below
- A variance from the provisions of Section ____ of the Ordinance as more specifically set forth below

I/We believe that the Zoning Hearing Board should approve this request because (specifically set forth the nature of your request, the grounds for relief, and the reasons both with respect to law and fact for granting the requested relief. Attach additional sheets, as necessary).

(Other items which may be necessary for the filing of this application or the granting of relief include: survey and/or site plan of property showing all structures and required yard setbacks; blue prints of the interior, written evidence of past applications, and any other evidence you wish the Board to consider).

I/We hereby certify that all of the above statements and the information set forth on any papers or plans submitted herewith are true and correct to the best of my/our knowledge and belief.

Date _____ Signature _____

Township Action		
Appeal No. _____	Fee Paid _____	Date Filed _____
Date of Hearing _____	Date of Posting _____	
Date of Advertisement _____		

Zoning Officer		
Action of Zoning Hearing Board of _____		
Date of Decision _____	Chairman _____	