

# NORTH WHITEHALL TOWNSHIP ZONING OFFICE

3256 Levans Road 610-799-3411  
Coplay, PA 18037 610-799-9629 FAX

## NORTH WHITEHALL TOWNSHIP ZONING HEARING BOARD APPEAL APPLICATION



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Applicant's Name

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Street Address

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City, State & Zip Code

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Telephone Number

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Email address

Appeal Number
Advertised Dates
Application Fee
Date Received (For Official Use Only)

The following is a list of questions designed to assist you and the Zoning Hearing Board in the efficient and speedy review of your appeal. Please thoroughly answer all questions which are applicable to your appeal. If you believe the question does not pertain to your appeal, indicate on this form by answering "Not applicable". **All Questions must be answered to consider this appeal form complete.**

A complete site plan must be attached to this application. **Please refer to Section 2.B of the North Whitehall Township Zoning Appeal Procedures and Policy for this requirement.** Return this form to the Zoning Officer when you file your application. Please type or print clearly.

***In case of a continuance of a hearing, all Applicants shall pay to North Whitehall Township one-half of the stenographer's appearance cost for each meeting continued beyond the Applicant's first meeting. The Applicant will be billed \$250.00 separately for each additional zoning meeting after the first meeting. If Applicant's case is NOT heard, additional fees do not apply.***

Please complete the following questions:

1. What is the applicant's interest in the premises affected? (i.e. owner, equitable owner, tenant)

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2. If applicant is represented by an attorney or counsel, please list their full name, address, phone, fax number and email address.

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3. If the property owner is not the applicant, list the full name, address and phone number of the owner.

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**4. Please provide the requested information about the Property involved in this Zoning Hearing Appeal as described below:**

Location: \_\_\_\_\_  
(Street Address)

Tax Map ID: \_\_\_\_\_ Lot Size: \_\_\_\_\_

Present Use: \_\_\_\_\_ Zoning District: \_\_\_\_\_

Date of when Present Use Began: \_\_\_\_\_

Date of acquisition of this Property by the Owner: \_\_\_\_\_

Please list each structure and it's use currently located on this property:

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5. What type of sewage and water facilities are available on the property? If no facilities are present, please refer to Question 16.

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6. Are there any outstanding State or Federal violations cited on this property at the time of this application? \_\_\_\_\_ If yes, please explain these violations below:

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7. Has any previous appeal been filed in connection with this property? \_\_\_\_\_ If yes, please list Applicant's Name, Date, and Nature of Appeal. \_\_\_\_\_

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8. Type of Appeal Sought:

a) Variance Appeal \_\_\_\_\_

b) Special Exception Appeal \_\_\_\_\_

c) Interpretation of Zoning Ordinance \_\_\_\_\_

d) Enforcement Notice Appeal \_\_\_\_\_

9. State in, narrative form, the nature of your appeal including the primary relevant facts intended to be presented to the Zoning Hearing Board. Please include a description of all explosive or toxic materials to be stored on this site. Please reference to your attachment if additional space is needed.

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10. What is the exact use proposed for the property? List hours of operation, number and type of employees, business equipment to be used or stored at the site, nature of normal business operations. (Please reference your attachment if additional space is needed.)

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11. Are additional State, Federal or other permits required to operate the proposed use or construct the structure? \_\_\_\_\_ If yes, please provide the list of permits and their status required to operate the proposed use or structure.

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12. Describe the landscaping proposed for this property that is planned, if any. Please indicate the type of landscape buffering proposed, if any.

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13. What is the character of the buildings and uses on abutting properties and what is the general character of the surrounding neighborhood? (Please reference your attachment if additional space is needed.)

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15. What will the impact of this use be on existing stormwater infrastructure? Has a stormwater engineering study been done that complies with Act 167 and has this plan been submitted to Lehigh Valley Planning Commission for their review?

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16. What will the impact of this use be on existing sewage or potable water infrastructure? Does this project comply with Act 537 and has the applicant secured DEP Sewage Facilities Planning Module approval? Will this project need municipal water or will individual wells be supplied to each dwelling unit or building? If a private water and sewer system is proposed, please indicate this within this section. An engineering study and plan should be done prior to the submission this appeal for sewer and water supplied in order to supply the information needed for the Zoning Board to grant approval of the Zoning Appeal.

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17. What degree will the proposed use emit smoke, dust, odor or other air pollutants, noise, vibration, light, electrical disturbances, water pollutants, or chemical pollutants? Such evidence may include the proposed use of proven special structural or technological innovations. Please provide specific and detailed information on all of the aforementioned topics. (Please reference your attachment if additional space is needed.)

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18. Will the relief requested, if authorized, alter the essential character of the neighborhood or district in which the property is located, or substantially or permanently impair the appropriate use of development of adjacent property, or be detrimental to the public welfare? Please give reasons for your answers to the aforementioned questions by explaining below: (Please reference your attachment if additional space is needed.)

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19. (I) (WE) believe that the Board should approve this request because: (include the grounds for the zoning appeal or reasons both with respect to law and fact for granting the conditional use requested. Please reference your attachment if additional space is needed.)

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20. **Comments:** Other Relevant Information or Additional Space for Answering Questions. **Please indicate if additional attachments are with this appeal application.**

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I hereby certify that all of the above statements contained in this application and any papers or plans submitted on behalf of this Zoning Appeal the North Whitehall Township Zoning Hearing Board herewith are true to the best of my knowledge and belief.

Date: \_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant & print applicant name)