

APPLICATION FOR ZONING AMENDMENT  
North Shenango Township  
11586 Linn Road - Espyville, Pa. 16424  
Office 724-927-2568 Fax 724-927-9447

Application No. \_\_\_\_\_

Fee Paid \_\_\_\_\_

The undersigned, owner (s) of the following legally described property, hereby request the consideration of a change in zoning district classification as specified below:

1. Name of Applicant \_\_\_\_\_

2. Mailing Address \_\_\_\_\_  
\_\_\_\_\_

3. Phone Number: Home \_\_\_\_\_ Business \_\_\_\_\_

4. Location description and lot number of property proposed for a change in zoning under this application:  
Property \_\_\_\_\_  
\_\_\_\_\_

5. Present Zoning District in which property is located \_\_\_\_\_

6. Description of existing use of the property  
\_\_\_\_\_  
\_\_\_\_\_

7. Proposed Zoning District  
\_\_\_\_\_

8. Proposed Use:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Supporting information: (Attach the following items to the application)
- A. Vicinity map showing property lines, streets, and existing and proposed zoning.
  - B. List all property owners' names and address within, contiguous to, and directly across the road from the proposed rezoning.
  - C. Statement of how the proposed rezoning relates to the Township's Comprehensive Plan.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

For Official Use Only  
Zoning Amendment

File Number \_\_\_\_\_

Date Filed \_\_\_\_\_

Fee Paid: Cash \_\_\_\_\_ Check No. \_\_\_\_\_

Received by \_\_\_\_\_

Dates of Notice in newspaper.

1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_

Date of public hearing \_\_\_\_\_

Date sent to County Planning \_\_\_\_\_

Decision of County Planning Commission: Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date sent to Township Planning \_\_\_\_\_

Decision of Township Planning Commission: Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of decision of Board of Township Supervisors \_\_\_\_\_

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Chairman \_\_\_\_\_ Date \_\_\_\_\_

Vice Chairman \_\_\_\_\_ Date \_\_\_\_\_

Supervisor \_\_\_\_\_ Date \_\_\_\_\_