

# East Drumore Township Zoning Hearing Board Application Procedures and Checklist

The East Drumore Township Zoning Hearing Board requires the following information to apply for a hearing:

- One Completed Application form signed by the property owner and six (6) copies.
- Names and Addresses of all adjoining property owners including those across a public right of way.
- Ground floor plans and elevations of proposed structure(s) (if applicable).
- Six (6) hard copies & one (1) electronic copy (in PDF format) of a scaled drawing of the site with sufficient detail and accuracy to demonstrate compliance with all applicable provisions of the ordinance.  
*\*Failure to submit 6 copies of drawings or plans, may result in additional copy fees.*
- Written description of the proposed use in sufficient detail to demonstrate compliance with the provisions of the ordinance. (See Article V - Special Exception Uses)
- Written description of the variance request, along with a description of the hardship that is being alleged and all reasons why the variance should be granted.
- Filing Fee (\$950.00 - check made payable to East Drumore Township)

**All information shall be submitted to the Zoning Officer no later than 4:00 pm on the day of the submission deadline:**

**Solanco Engineering Associates, LLC  
103 Fite Way, Suite C  
Quarryville, PA 17566**

**Phone: (717) 786-0355, ext. 102      Fax: (717) 806-5748**

---

### For Official Use Only

Date Application Received \_\_\_\_\_  
Date Required to Hold Hearing \_\_\_\_\_  
Scheduled Hearing Date \_\_\_\_\_

Advertisement Dates \_\_\_\_\_ & \_\_\_\_\_  
Date Property Posted \_\_\_\_\_

# EAST DRUMORE TOWNSHIP ZONING HEARING BOARD

Application for Variance, Special Exception or Appeal of Determination

This application is a legal document to be utilized in a quasi-judicial hearing. Solanco Engineering Associates does not provide legal advice and cannot assist in the completion of this application. Applicants shall seek legal counsel and/or services of a land planning consulting firm for assistance if required.

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

1. Applicant's Name:

\_\_\_\_\_

Applicant's Telephone Number and E-mail Address:

\_\_\_\_\_

Applicant's Mailing Address:

\_\_\_\_\_

\_\_\_\_\_

2. Mailing Address of the property (If different from above address):

\_\_\_\_\_

\_\_\_\_\_

3. Tax Account Number of Property:

180-

\_\_\_\_\_

4. Name and Address of Owner (If Applicant is not the Owner):

\_\_\_\_\_

\_\_\_\_\_

5. The reason for this application, please provide Zoning Ordinance Section of request:

\_\_\_\_\_ Special Exception \_\_\_\_\_ Variance \_\_\_\_\_ Other \_\_\_\_\_

Section No. \_\_\_\_\_

6. Please give a brief, detailed description of the property.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. What buildings or other structures are now on this property?

---

---

---

8. What is the current use of the property?

---

---

---

9. What is the present zoning classification of the property involved?

---

---

---

10. What additions to or improvements in the property do you intend to make under this application, if any?

---

---

---

---

---

---

---

---

11. Variance or Special Exception Justification:

---

---

---

---

---

---

---

---

---

---

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

\_\_\_\_\_  
Date