

**BRADFORD TOWNSHIP ZONING HEARING BOARD**

**VARIANCE APPLICATION**

**Bradford Township  
136 Hemlock St.  
Bradford, Pa. 16701  
(814) 368-3564**

**Daniel McCarthy, Chairperson  
(814) 331-4659**

Date \_\_\_\_\_

Applicant's Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

Owner of Property \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

**Attached is a copy of page 328.1 of the Bradford Township Zoning Ordinance regarding  
Variances. Please review the five paragraphs listed and incorporate the answers into your  
application. You may use a separate sheet of paper to respond to these issues.**

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**PROPERTY INFORMATION** (Give Tax Parcel No., Recorders Vol. & Page No.)

Property Location \_\_\_\_\_  
\_\_\_\_\_

Date of Purchase \_\_\_\_\_ Lot Area (sq. ft.) \_\_\_\_\_ Width \_\_\_\_\_ Depth \_\_\_\_\_

Present Use \_\_\_\_\_

Proposed Use \_\_\_\_\_

Lot or area Zoned District \_\_\_\_\_ If the lot or area are in more than one Zoned District supply this information as requested above for both or all locations.

**VARIANCE REQUEST**

The applicant believes that a **VARIANCE** should be granted because: (Show how and why this will benefit the district in which the area and request is located.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The applicant is unable to make reasonable use of this property for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The proposed **VARIANCE** will not alter the essential character of the neighborhood for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is Storm Water management required? If yes, explain.

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List other data or codes that will apply.

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**SITE OR PLOT PLAN**

A site or plot plan for the proposed site is required. This must include all buildings on such site(s) and show all other areas including tax parcel numbers, current names, address of owners, flood plain data, storm water management data, sewer data, and information of highways and streets that will be affected.

I hereby certify that the proposed request for a Variance is authorized by the owner of record and that I have been authorized by the owner(s) to make this application for a Variance as his authorized agent, or I am the owner of record.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\$225.00 APPLICATION FEE PAYABLE TO BRADFORD TOWNSHIP**

Ch 1 #5 Plus ½ Stenographer's Appearance Fee Ch 27 #820 E.

<b>Office Use Only</b> Check # _____ Cash _____ Date Paid _____
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