

**BETHEL TOWNSHIP ZONING HEARING BOARD**  
**BERKS COUNTY, PENNSYLVANIA**  
**ZONING HEARING APPLICATION**

APPLICANT'S NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ WORK: \_\_\_\_\_

OWNER'S NAME (if different from Applicant): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_ WORK: \_\_\_\_\_

STREET ADDRESS OF SUBJECT APPLICATION: \_\_\_\_\_

SUBDIVISION NAME: \_\_\_\_\_ LOT# \_\_\_\_\_

TAX PIN: \_\_\_\_\_

The Applicant hereby appeals to the Bethel Township Zoning Hearing Board for the following purpose (s):

Special Exception – reference Section (s) \_\_\_\_\_

Variance – from Sections (s) \_\_\_\_\_

Other \_\_\_\_\_

Describe proposed use:

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

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

This Section to be completed by Zoning Officer \_\_\_\_\_ Zoning District \_\_\_\_\_

\$1,000.00 Fee       Hearing Application Complete       Zoning Application Complete

Application deemed complete date: \_\_\_\_\_

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