

# HARMAR TOWNSHIP

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## REQUEST FOR ZONING ORDINANCE AMENDMENT OR ZONING DISTRICT MAP AMENDMENT

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

Parcel No. \_\_\_\_\_

Current Zoning District: \_\_\_\_\_

Owner Name: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No. \_\_\_\_\_

Cell No. \_\_\_\_\_

Describe Amendment Request: \_\_\_\_\_

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Identify Sections of Ordinance/Map to be Amended: \_\_\_\_\_

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Describe Current Use of Property: \_\_\_\_\_

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Describe Proposed Use of Property: \_\_\_\_\_

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☐ As part of this Application, the Applicant must provide seven (7) copies of a survey or scaled-drawing of the property that indicates the location and size of the subject lot, the current conditions (improvements and structures), and the proposed improvements/structures; along with any other information that may be pertinent or required by the Board.

☐ Applicable Fees

I/We hereby certify that all of the above information is true and correct to the best of My/Our knowledge.

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

Property Owner Signature \_\_\_\_\_ Date \_\_\_\_\_

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**TOWNSHIP USE ONLY**

Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Officer Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Planning Commission Review Date: \_\_\_\_\_

Recommendation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_