## ZONING HEARING BOARD TOWNSHIP OF WARWICK LANCASTER COUNTY, PENNSYLVANIA

## APPLICATION FOR A SPECIAL EXCEPTION

4.	Email Address of Property Owner:		
COM	PLETE QUESTIONS #5 - #9 ONLY IF APPLICANT IS DIFFERENT FROM PROPERTY OWNER		
5.	Name of Applicant:		
6.	nterest of Applicant:		
7.	Address of Applicant:		
8.	Telephone Number of Applicant:		
9.	Email Address of Property Owner:		
10.	Address of Property Affected:		
11.	State the nature of the Special Exception which is sought:		
12.	State the Section of the Township Zoning ordinance from which the Special Exception is being request the conditions under which the Special Exception is requested:	ted and	

- 13. The following information shall accompany this application, as applicable:
  - a. A map showing the lot in question drawn to scale, indicating the lot size and showing all dimensions of lot lines and the exact location(s) on the lot of all proposed buildings and structures and alterations to buildings and structures. Indicate zoning district; if in more than one district place the district line on the map.
  - b. A statement indicating the use, height, length, width and proportion of the total lot area covered by all proposed and-or existing buildings, structures, or additions, or alterations to a building.
  - c. A statement indicating the number of families and/or commercial or industrial establishments to be accommodated within existing and proposed buildings on the lot. in the case of commercial and industrial uses and home occupations, indicate the floor area to be devoted to each use.

- d. The number, location and design of parking and loading areas, recreation areas, signs, buffer yards and landscaping, means of ingress and egress to the lot, routes for pedestrian and vehicular traffic, and outdoor lighting throughout the tract.
- e. Any other information which may be required by the Section of the Zoning Ordinance authorizing the Special Exception which is requested.
- 14. This application is not complete until the fee established for such applications by ordinance or resolution of the Board of Supervisors has been paid by Applicant and all information required by this application has been furnished. In making this application, the Applicant agrees to pay all fees required by the fee schedule adopted by the Board of Supervisors by ordinance or resolution in effect on the date of the application.

By signing this Application, I, the Applicant, do hereby verify that I have reviewed and understand the statements made in this Application and that all such statements are true and correct to the best of my knowledge, information and belief. These statements are being given by me to induce official action on the part of the Warwick Township Zoning Hearing Board, and I understand that any false statements made herein are being made subject to the penalties of 17 Pa. C.S. §4904 relating to unsworn falsifications to authorities.

Date:	
	(Signature of Applicant)

(If the application is being made by a person other than the property owner, attach a written authorization from the owner authorizing the application and designating you as his agent.)