



HUNTINGTON TOWNSHIP

750 TROLLEY ROAD

YORK SPRINGS, PA. 17372

Phone: 717-528-4027

Email: office@huntingtontwp.net

APPLICATION FOR CONDITIONAL USE, ZONING VARIANCE, SPECIAL EXCEPTION OR AMENDMENT TO CHANGE THE ZONING MAP

APPLICATION DATE: _____

APPLICATION IS HEREBY MADE TO THE BOARD OF SUPERVISORS FOR A

- ☐ **CONDITIONAL USE PERMIT** (CHAPTER 27, SECTION 27-1307)
☐ **ZONING VARIANCE** (CHAPTER 27, SECTION 27-1315)
☐ **SPECIAL EXCEPTION**
☐ **CHANGE TO THE ZONING MAP**

OF THE HUNTINGTON TOWNSHIP CODE OF ORDINANCES.

NAME (APPLICANT): _____

ADDRESS: _____

TAX MAP PARCEL NO: _____

PHONE: _____ EMAIL: _____

DO YOU OWN OR LEASE THE PROPERTY? _____

DEED REFERENCE: DB _____ PG _____

IF DIFFERENT FROM ABOVE,

NAME (OWNER): _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

ATTORNEY: _____ PHONE: _____

ARCHITECT: _____ PHONE: _____

ENGINEER: _____ PHONE: _____

CONTRACTOR: _____ PHONE: _____

DESCRIPTION AND LOCATION OF PROPERTY: _____

CURRENT ZONE: ☐ AC ☐ RA ☐ RS ☐ CI ☐ FP

THE EXISTING USE OF THE LAND AND IMPROVEMENTS: _____

APPLICABLE ZONING ORDINANCE SECTION: _____

THE APPLICANT REQUESTS A ☐ CONDITIONAL USE PERMIT ☐ ZONING
VARIANCE ☐ SPECIAL EXCEPTION ☐ CHANGE TO THE ZONING MAP FOR THE
ABOVE PROPERTY FOR:

UNIQUE CIRCUMSTANCES OR CONDITIONS THAT CREATE AN UNDUE HARDSHIP:

THE APPLICANT ALLEGES THAT THE PROPOSED CONDITIONAL USE, VARIANCE,
SPECIAL EXCEPTION OR ZONING MAP CHANGE:

A) WOULD BE IN HARMONY WITH THE CHARACTER OF THE NEIGHBORHOOD
BECAUSE: _____

B) AND THAT IT WOULD NOT BE DETRIMENTAL TO THE PROPERTY, PERSONS OR
WELFARE OF THE NEIGHBORHOOD BECAUSE: _____

C) IN ADDITION TO MEETING THE STANDARDS PRESCRIBED BY THE ZONING
ORDINANCE, THE APPLICANT WILL PROVIDE _____

ATTACH ADDITIONAL SHEETS IF MORE SPACE IS NEEDED.

ATTACH ADDITIONAL INFORMATION TO APPLICATION

- _____ A) SUBMISSION FEE OF \$400 (ADDITIONALLY, THE APPLICANT WILL
BE BILLED FOR THE COST OF ADVERTISING THE MEETING.)
- _____ B) PROPERTY DEED, 1 COPY
- _____ C) SITE PLAN, 3 FULL SIZE COPIES, TWELVE 11"x17" AND 1 PDF
- _____ D) PHOTOGRAPHS
- _____ E) COPY OF THE APPLICABLE ZONING ORDINANCE SECTION
- _____ F) 11"x17" COPY OF THE ZONING MAP WITH PROPERTY LOCATION
- _____ G) OTHER _____
- _____ H) OTHER _____

BY SIGNING THIS APPLICATION, I DECLARE THAT:

- I am the title owner of record of the property (landowner), agent of the landowner, or tenant with permission of the landowner, or the holder of an option or contract to purchase the property.
- The information provided in this application is accurate to the best of my knowledge.
- I understand my responsibility to make payment of all review and inspection fees when due and in full.
- I understand that false information provided on this application may result in a stop work order or revocation of the permit and that false statements herein made also are subject to the penalties of 18 Pa.C.S.§4904, relating to unsworn falsification to authorities.

APPLICANT SIGNATURE AND DATE

PRINT NAME

REVISED 06/18/2026

DO NOT WRITE BELOW THIS LINE, OFFICE USE ONLY

RECEIVED BY: _____ DATE RECEIVED: _____

DATE OF HEARING: _____ FEE RECEIVED: _____

DATES OF PUBLIC NOTICE: _____

NAME OF NEWSPAPER: _____

DATE NOTICES SENT TO NEIGHBORS: _____

DATE OF PUBLIC NOTICE AT THE PROPERTY: _____

APPROVED OR DENIED DATE: _____