



5. Property Details:
- a. Present Zoning Classification: \_\_\_\_\_
  - b. Present Land Use: \_\_\_\_\_
  - c. Location (Street Address):  
\_\_\_\_\_
  - d. Parcel #: \_\_\_\_\_
  - e. Lot Dimensions:  
(1) Area: \_\_\_\_\_  
(2) Frontage: \_\_\_\_\_  
(3) Depth: \_\_\_\_\_
  - f. Circle all that apply in regards to the above specified property:  
Public Water                  Public Sewer  
  
Private Well                  Private Septic
  - g. Size, construction, and use of existing improvements; use of land, if unimproved: **(Please submit as an attachment)**
6. Proposed Use(s):
- a. Proposed use(s) and construction: Please provide size, construction and proposed use(s). **(Please submit as an attachment)**
7. Legal grounds for appeal (Cite specific sections of Pennsylvania Municipalities Planning Code, Zoning Ordinance, Subdivision Regulations, and/ or other Acts or Ordinances). All sections that apply must be listed in which relief is required and an explanation provided. **(Please submit as an attachment)**
8. Has any previous appeal been filed concerning the subject matter of this appeal?  
 Yes     No
- If yes: specify: **(Please submit as an attachment)**
9. Challenges please list requested issues of fact or interpretation:  
**(Please submit as an attachment)**
10. Worcester Township to provide the list of names and addresses of properties situated in the vicinity of the subject property as per Township Code Section 150-224

**CERTIFICATION**

I (We) hereby certify that the above information is true and correct to the best of my (our) knowledge, information or belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

COMMONWEALTH OF PENNSYLVANIA:

COUNTY OF \_\_\_\_\_ : SS

The undersigned, being duly sworn according to law, deposes and says the he/she is the above names applicant, that he/she is authorized to and does take this affidavit on behalf of the owner, and foregoing facts are true and correct.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Applicant

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

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

\_\_\_\_\_  
Zoning Officer