



# TOWNSHIP OF SPRING

**BERKS COUNTY, PA**

2850 WINDMILL RD.

READING, PA 19608

Tel. (610) 678-5393

Fax. (610) 678-4571

Website: springtwpberks.org

## APPLICATION TO THE BOARD OF SUPERVISORS

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

This application is made in accordance with the applicable Zoning Ordinance of the Township of Spring, Berks County, Pennsylvania, and amendments thereto.

Applicant \_\_\_\_\_

Address of Applicant \_\_\_\_\_ Phone: \_\_\_\_\_

Address of Property affected \_\_\_\_\_

Property Owner of affected property \_\_\_\_\_ *Copy of Deed or Instrument to be attached*

Hearing requested in regard to: ( ) Change to Zoning Ordinance  
( ) Curative Amendment  
( ) Appeal to Planning Commission action  
( ) Conditional Use Hearing

Fee: \_\_\_\_\_ (Fee shall be submitted with this application)

Statement on separate sheet(s) shall be attached to application setting forth reason for Hearing by the Board of Supervisors.

The applicant by his signature, certifies that he has read the applicable sections of the Zoning Ordinance and its amendments and is fully cognizant of its requirements. Costs incurred over and above the current fee set for hearings before the Board of Supervisors shall be paid by the applicant. Any unused portion of the fee will be returned to the applicant.

By: \_\_\_\_\_  
Applicant or Corporate Officer

Date application received in completed form: \_\_\_\_\_ By \_\_\_\_\_

Date of hearing by Board of Supervisors: \_\_\_\_\_

Advertised in newspapers: \_\_\_\_\_

Location Posted: \_\_\_\_\_ By: \_\_\_\_\_