



**BEAR CREEK TOWNSHIP
APPLICATION
ZONING BOUNDARY CHANGE**

Revised 3-6-08

**BEAR CREEK TOWNSHIP
3333 Bear Creek Boulevard
Bear Creek Township PA 18702
Phone (570) 822-2260
Fax (570) 704-0237**

1. APPLICANT:

Name: _____

Mailing Address: _____

Phone: _____

2. LEGAL INTEREST IN PROPERTY:

- Owner of Record
- Lessee
- Equitable Owner (Attach Supporting Documentation)
- Other (Attach Written Narrative)

3. LOCATION OF THE PROPERTY TO BE REZONED

List Mailing Address and/or Location of Property:

**4. LIST THE OWNER(S) OF RECORD OF THE PROPERTY INDICATED
IN ITEM # 3.**

Name: _____

Mailing Address: _____

Phone: _____

5. **LEGAL DESCRIPTION OF PROPERTY: (PROVIDE 10 COPIES)**

A copy of the deed to the property which includes a legal description of the metes and bounds of the property

6. **DESCRIBE THE PRESENT USE OF THE PROPERTY** (If the entire property is not subject to the requested Zoning Boundary Change, provide a clear distinction on the area subject to the request.

Attach additional sheets if necessary.

7. **SIZE OF PROPERTY TO BE REZONED**

8. **PRESENT ZONING CLASSIFICATION:** _____

9. **PROPOSED ZONING CLASSIFICATION:** _____

10. **PROPOSED USE OF THE PROPERTY SUBJECT TO REZONING:**

Attach additional sheets if necessary.

11. **LOCATION MAP: (PROVIDE 10 COPIES)**

Include a map at a scale of not greater than one inch equals 100 feet, which clearly delineates the following information:

- a. The property and/or total area of land subject to the requested zone change. The

property and/or total area should be “shaded” or “highlighted” in a manner to distinguish its boundaries from adjoining land.

- b. A scaled plan of the area proposed to be rezoned, which indicates abutting streets, the zone classification of adjoining properties and the names and addresses of the true and correct owners of record based upon the records contained in the Luzerne County Tax Assessor's Office, for a distance (diameter) extending two hundred (200) feet from the boundaries the area proposed to be rezoned.
- c. An overlay of the proposed zoning boundaries upon a copy of the Bear Creek Township Zoning Map.

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED WITHIN THIS APPLICATION, ALONG WITH SUPPORTING DOCUMENTATION IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE. I FURTHER AGREE TO REIMBURSE BEAR CREEK TOWNSHIP FOR THE COST INCURRED FOR THE PUBLICATION OF LEGAL ADS ASSOCIATED WITH THIS APPLICATION.

SIGNATURE OF APPLICANT

DATE

SIGNATURE OF OWNER
(OWNER OF RECORD AS PROVIDED BY DEED)

DATE

THE OWNER'S SIGNATURE IS ALWAYS REQUIRED. FAILURE TO PROVIDE OWNER'S SIGNATURE WILL RESULT IN YOUR APPLICATION BEING DEEMED INCOMPLETE AND IT WILL BE RETURNED TO YOU.