ROSS TOWNSHIP
1000 Ross Municipal Drive
Pittsburgh, PA 15237
Phone: (412) 931-7055 Fax: (412) 931-3508

APPEALS BOARD / FIRE APPEALS BOARD APPLICATION

PROPERTY INFORMATION

Property Address: _____ Zoning District: _____ Ward: _____
Owners Name: _____ Parcel Number: _____ - ___ - _____
Address: _____ Phone: ( ) _____
City: _____ State: _____ Zip Code: _____ Fax: ( ) _____

APPLICANT INFORMATION

Name: _____
Address: _____ Phone: ( ) _____
City: _____ State: _____ Zip Code: _____ Fax: ( ) _____

_____ _____
Date of Application Signature

VARIANCE / INTERPRETATION INFORMATION

The owner/applicant requests that a determination be made by the Ross Township Appeals Board or Fire Appeals Board on the following appeal, which was denied by the Ross Township Building Inspector and/or Fire Marshal on _____ , 20 _____.

☐ An interpretation ☐ A variance to the Ross Township Code of Ordinances, Chapter 5 - Code Enforcement , Part _____ , Section _____ , subsection _____ , Chapter _____, section _____, subsection _____, letter / number_____ for the following reason(s):

☐ It is an appeal for the interpretation of the relevant code.

☐ It is a request for a variance relating to (state the variance briefly):

_____
_____
_____

The description of the property in this application is as follows:

Present improvement on lot:: _____ Lot size: _____ square feet
Current or former use: _____
Proposed use: _____

I / we believe that the Appeals Board or Fire Appeals Board should approve this request because: (Include the grounds for the appeal or reasons with respect to law and fact for granting the appeal or variance, and/or if hardship is claimed, state the specific hardship)

_____
_____
_____
_____
_____

Has any previous application or appeal been filed in connection with these premises? ☐ No ☐ Yes- please list dates and results:

_____

What is the applicant's interest in the premises affected? ☐ Owner ☐ Agent ☐ Lessee ☐ Other - _____

STATEMENT OF TRUTH
COMMONWEALTH OF PENNSYLVANIA COUNTY OF ALLEGHENY

Deponent, being duly sworn, says they are the:

☐ Owner of record of the property for which this application is made, and that all the statements and data furnished with this application are true and correct.

☐ Authorized agent for the owner of record of the property for which this application is made and as such has express authority to bind such owner to all terms and conditions of any building, fire or occupancy permit issued pursuant to this application, and that all statements and data furnished with this application are true and correct.

Sworn to and subscribed before me this _____ day of _____ 20 _____.

_____ _____ _____
Notary Public Applicant (signature) Applicant (printed)

ABUTTING PROPERTY OWNERS

The following are the names and addresses of owners of property who directly abut and/or are across the right-of-way of the property involved in this appeal. All information should be obtained from the latest assessment information from the Allegheny County Real Estate Division or web site (http://www2.county.allegheny.pa.us/RealEstate/search.asp)

Name	Address

DIRECTIONS FOR FILING

Seven (7) collated sets of this application and all other pertinent information (survey, site plan, drawings, photographs, etc) are required to be submitted to the Building Inspection/Zoning Department with this application. Any information left blank on this application will result in your application being denied and returned to the applicant. If more space is required, attach a separate sheet to each copy of this application and make specific reference to the question being answered. Please note that the fee must be paid with your application. Since the Appeals Board or Fire Appeals Board does not have scheduled monthly meetings, you will be informed in writing with the date of your hearing.

FILING FEES

$500.00 for each application. Please note that this is an application fee only and additional fees may be required as permitted under the Pennsylvania Uniform Construction Code.

(DO NOT WRITE BELOW THIS LINE - TOWNSHIP USE ONLY)

Fee: **$ 500.00**

Application accepted: _____ **Date:** _____

Ross Township Building Code Official

Appeal Board / Fire Appeal Board Appeal No.		**Invoice Number**	
Public Hearing Date		**Check Number**	
Date Hearing Advertised			
Date agenda mailed to abutting property owners		**Date Property Posted**	