



600 Church Lane
 Yeadon, PA 19050
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www.yeadonborough.com

YEADON BOROUGH ZONING HEARING BOARD MEMBER APPLICATION

The Zoning Hearing Board is appointed by the Yeadon Borough Council. The Board's primary purpose is to render decisions regarding:

- Appeal from decision of the Code Officer
- Appeal from Zoning Enforcement Notice
- A Request for Variance
- A Request for Special Exception
- A Unified Appeal

Contact Information	
Name	
Street Address	
Home Phone	
Cell Phone	
Work Phone	
Are you 18 years of age or older? YES NO (circle one)	

QUALIFICATIONS

1. Resident of the Borough of Yeadon, 18 years of age or older
2. Civic minded with a general understanding of basic zoning concepts
3. Able to attend training sessions offered by the Pennsylvania Association of Boroughs
4. Able to understand and comprehend technical problems
5. Able to assemble information from written and oral testimony
6. Able to deliberate in an orderly fashion in order to make recommendations
7. Able to make decisions that are not based on personal opinion but comply with the Borough's Comprehensive Plan, ordinances and adopted plans
8. Not easily intimidated and/or swayed by opinions
9. Must hold no other office which constitutes a conflict of interest with the appointment as a Zoning Hearing Board Member

Qualifications and Skills: Please indicate your qualifications and skills that make you eligible to serve as a Yeadon Borough Zoning Hearing Board member. Please attach a resume

Present Occupation:

Special Qualifications:

Committees or Boards previously served on/currently serving on:

I have reviewed the following information relative to Pennsylvania's Zoning Hearing Boards. Please place a check mark to note the documents reviewed.

	The Planning Commission in Pennsylvania The Planning Commission in Pennsylvania (pa.gov)
	The Zoning Hearing Board, Planning Series #6 The Zoning Hearing Board Planning Series # 6 (pa.gov)
	PA Municipalities Planning Code Quick Guide http://home.ptd.net/~kurtiz96/PDFJTPA/MPC_quick_guide.pdf

Applicant Signature:

Name: _____

Date: _____