



## BUREAU OF CITY PLANNING AND ZONING

City Hall | 340 North Washington Avenue | Scranton, PA 18503 | p: 570.348.4280 | f: 570.348.4171

### APPLICATION PROCEDURES FOR ZONING HEARING BOARD

\*Please fill out application in full: If any section is not filled out entirely, the application will be returned to you:

Applicant name(s), address, landowner name/address (landowner authorization, if needed), project cost (if any), present/proposed use/address of property; dimensions of lot; names and addresses of all property owners abutting, adjoining and across the street from the property in question (info can be found at <http://www.lackawannacounty.org/index.php/lackawanna-county-assessors-office>) (assessor's office site) Reason for the request, giving as much detail as possible; existing/proposed no. of parking spaces, description of existing & proposed use(s) of the property, including no. of dwelling units, min. sq ft of proposed units, plans for buffer zone, if applicable. Also plot plan and/or pictures; Setback information (if applicable).

\*Application must be notarized.

\*Nine (9) copies of any plans/drawings etc.(if applicable) must be provided to the Zoning Bureau by the deadline written below.

\*See attached fee schedule for appropriate fee. (Section 104.A.5 &B) Application fee is non-refundable.

\*You will be notified of the date and time of the Zoning Hearing by certified mail. Neighbors will be notified by mail, the property will be posted and it will be advertised twice.

\*If you have any questions, please call 348.4193 x4531

Deadline for application:

Date of Hearing:

## Zoning Hearing Board Fee Schedule

*Section 104 (4)(5), as amended:*

Fees for submittal to the Zoning Hearing Board for a variance or special exception or to the City Council as a conditional use shall be as follows:

### Construction/Alteration Cost Permit Charge

0- 150,000	\$400.00
150,000-1,000,000	\$750.00
≥ 1,000,001	\$750.00 per million dollars of construction cost or fraction thereof up to a maximum fee of \$5,000

Special hearings requested require a filing fee of \$800.00, and if over \$1,000,000, then \$800 per million

RULES FOR THE ZONING BEARING BOARD  
OF THE CITY OF SCRANTON

1. **APPLICATIONS** All applications for zoning relief shall be filed not less than twenty-one (21) days prior to the hearing date for which the application will be placed on the agenda. No application will be accepted which is incomplete and does not contain all of the required information including a listing of all abutting, adjoining and across the street land owners and their addresses, a brief statement concerning the justification for the zoning relief requested and the citations to the applicable provisions of the Zoning Ordinance.
  
2. **CONTINUANCES** Any request for a continuance for any hearing scheduled before the board shall be in writing and received by the Secretary to the Zoning Hearing Board not less than seventy-two (72) hours prior to the hearing. The continuance request shall contain a brief statement concerning the reason therefore. All continuance requests shall be reviewed by the Zoning Hearing Board on a case by case basis and the decision of the Zoning Hearing Board will be communicated not less than forty-eight (48) hours prior to the scheduled hearing. No continuance shall be granted unless authorized by the Zoning Hearing Board pursuant to these rules. In approving a request for a continuance, the Zoning Hearing Board may require the applicant to pay an administrative fee not to exceed One Hundred (\$100.00) Dollars to defray any additional expenses incurred by the Zoning Hearing Board in any case where a continuance is granted.
  
3. **SPECIAL HEARINGS** The Zoning Hearing Board shall meet on the second Wednesday of each month at 6:00 p.m. in Scranton City Hall Chambers to conduct hearings on all applications for zoning relief. To the extent practicable, no special hearings will be scheduled or conducted by the Zoning Hearing Board unless authorized by the Zoning Hearing Board. Any request for a special hearing shall be in writing and attached to the application. No special hearing shall be granted unless authorized by the zoning hearing board pursuant to these rules. In approving a request for a special hearing, the zoning hearing board may require the applicant to pay an administrative fee not to exceed Five Hundred (\$500.00) Dollars to defray the expenses incurred by the zoning hearing board in conducting a special hearing.
  
4. **ZONING OFFICER ATTENDANCE AT ZONING HEARINGS** The Zoning Officer shall attend all hearings before the Zoning Hearing Board to assist the Board from time to time in its consideration of any application on the agenda.

**ZONING HEARING BOARD**  
CITY OF SCRANTON, PENNSYLVAINA

Application Date: \_\_\_\_\_ Hearing Date \_\_\_\_\_ Application Number \_\_\_\_\_

VARIANCE                       SPECIAL EXCEPTION                       APPEAL                       INTERPRETATION

Applicant Name \_\_\_\_\_

Address (City, State, Zip) \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Relationship to Landowner \_\_\_\_\_  ATTACHED  AGREEMENT OF SALE  LANDOWNER AUTHORIZATION

Landowner Name \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Cite all applicable sections of Zoning Ordinance \_\_\_\_\_

Property Location _____		
Zoning District _____	Lot Size _____	Approximate Project Cost \$ _____
Present/Proposed Use _____ / _____		

Setbacks (if applicable)

Location	Required Distance	Actual Distance	Seeking relief of
_____	_____	_____	_____

Justification for Request

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Date/decision of any previous zoning action on subject property \_\_\_\_\_

List all affected property owners- (adjoining, abutting and across the street must be listed-attach separate sheet as needed)

Name	Address	Present Use
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

**APPLICATION MUST BE FILLED OUT COMPLETELY AND NOTARIZED.**  
 INCOMPLETE APPLICATIONS WILL BE RETURNED  
 File application, plans and all other documentation along with 8 copies of each and appropriate fee.

Commonwealth of Pennsylvania )  
 )SS: Despondent being duly sworn say that he/she is the owner or authorized agent for the owner of the  
 County of \_\_\_\_\_ ) property for which this application is made and that all statements and data furnished with this  
 application are true and correct.  
 Sworn and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_. My Commission expires: \_\_\_\_\_

APPLICATION FEE
\$
AMOUNT PAID

Signature of Notary Public \_\_\_\_\_ Signature of Applicant \_\_\_\_\_

**DO NOT WRITE BELOW-FOR OFFICIAL USE ONLY**

APPROVED

DENIED

_____ _____ _____ _____	_____ _____ _____ _____
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