

TOWNSHIP OF COVINGTON  
ZONING VARIANCE APPLICATION  
PO BOX 253  
COVINGTON, PA 16917

COVINGTON TOWNSHIP ZONING VARIANCE APPLICATION

**Applicant Information:**

- Applicant Name: \_\_\_\_\_
- Company Name (if applicable): \_\_\_\_\_
- Mailing Address: \_\_\_\_\_
- Phone Number: \_\_\_\_\_
- Email Address: \_\_\_\_\_

**Property Owner Information (if different from Applicant):**

- Owner Name: \_\_\_\_\_
  - Mailing Address: \_\_\_\_\_
  - Phone Number: \_\_\_\_\_
- Same as Applicant

**Property Information:**

- Property Address: \_\_\_\_\_
- Tax Parcel Number(s): \_\_\_\_\_
- Zoning District: \_\_\_\_\_
- Total Acreage of Parcel: \_\_\_\_\_

**Relief Requested:**

Identify **each** section of the Zoning Ordinance from which relief is requested.

- Ordinance Sections(s): \_\_\_\_\_
  - Type of Relief Requested (describe specifically): \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Required Variance Criteria (MPC §910.2)**

The applicant must submit a written statement addressing **ALL** the following criteria. Failure to address each criterion may result in denial of the application.

**A. Unique Physical Circumstances**

Describe the unique physical circumstances or conditions of the property (e.g., irregular shape, topography, environmental features): \_\_\_\_\_

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**B. Unnecessary Hardship**

Explain why the property cannot be developed in strict conformity with the Zoning Ordinance and why a variance is necessary to enable reasonable use: \_\_\_\_\_

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**C. Hardship Not Self-Created**

Explain how the alleged hardship was not created by the applicant or property owner: \_\_\_\_\_

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**D. Minimum Variance**

Explain why the variance requested is the **minimum relief necessary** to afford relief:

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**E. Neighborhood Character**

Explain how granting the variance will **not alter the essential character of the neighborhood**, impair adjacent properties, or be detrimental to the public welfare:

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**Supporting Documents:**

Attach all relevant materials, including but not limited to:

- Site plan or survey
- Maps or aerial imagery
- Photographs
- Environmental or engineering reports (if applicable)
- Any additional documentation supporting variance request

**Authorization:**

I hereby certify that the information contained in this application and accompanying documents is true and correct to the best of my knowledge. I understand that the burden of proof rests with the applicant and that approval of a variance is not guaranteed.

Applicant Signature: \_\_\_\_\_

Printed Name: \_\_\_\_\_

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

**TOWNSHIP USE ONLY**

- Date Application Received: \_\_\_\_\_
- Application Fee Paid: \$ \_\_\_\_\_

**Administrative Review**

- Application complete for scheduling
- Application incomplete (items missing): \_\_\_\_\_

Zoning Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Township Secretary Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Zoning Hearing Board Review**

- Public Hearing Date: \_\_\_\_\_
- Decision of ZHB:  Approved  Denied  Approved with Conditions
- Date of Decision: \_\_\_\_\_

*Decision rendered by formal vote of the Zoning Hearing Board at a public hearing. See written decision and official minutes.*