



Bureau of Planning and Zoning
435 Hamilton Street
Allentown, Pennsylvania
610.437.7630
Fax 610.437.8781

ZONING HEARING BOARD

Property Address _____

Application # _____

Zoning District _____

Lot Size _____

APPLICANT: NAME _____
ADDRESS _____
PHONE # _____
EMAIL _____

OWNER: NAME _____
ADDRESS _____
PHONE # _____
EMAIL _____

NOTICE OF APPEAL

TO: THE ZONING HEARING BOARD OF THE CITY OF ALLENTOWN, PA

I hereby appeal from the ruling of the ZONING OFFICE, entered on (date) _____
denying the proposed construction and/or use on the subject property described herewith,

and I hereby specify the following reasons for so doing:

You are hereby requested to fix a time for hearing of this appeal as required by law and ordinance.

OWNER (Signature)

APPLICANT (Signature)

OWNER (Printed Name)

APPLICANT (Printed Name)

