



BENSALEM TOWNSHIP

Building and Planning Department
2400 Byberry Road • Bensalem PA 19020
215-633-3644 • FAX 215-633-3653

EXHIBIT PC-28

REZONING CHECKLIST

NAME OF APPLICANT: _____ Date of Complete Submission: _____

The following checklist summarizes the information which must be submitted with and/or shown on the Rezoning Plan in order to be reviewed by Township Agencies and the Bensalem Township Council. These requirements were adopted and approved by the Bensalem Township Board of Supervisors on May 28, 1968.

The Checklist must be completed by the applicant at the time of submission.

IF INCOMPLETE, the Rezoning Request shall be returned to the applicant noting the deficiencies.

Check each item completed. If item is not applicable, note "N/A" in the space provided.

N/A

<input type="checkbox"/>	Must submit copy of application and plan(s) on a disc in .pdf file format or email same to jmryan@bensalem-township.org
<input type="checkbox"/>	25 copies of Petition For Changes Of Zoning
<input type="checkbox"/>	25 copies of plans folded no larger than 8" X 11"
<input type="checkbox"/>	Copy of Deed or Agreement of Sale
<input type="checkbox"/>	Name and address of registered Land Surveyor or Professional Engineer who prepared plan and description.
<input type="checkbox"/>	Complete scaled dimensions of property to be rezoned, including all bearings and distances.
<input type="checkbox"/>	Relationship and/or location of subject property to the nearest street intersection (tie in distance).
<input type="checkbox"/>	Owners of record of all adjoining property including deed book and page number.
<input type="checkbox"/>	Zoning Classification of adjoining property.
<input type="checkbox"/>	Existing use of all adjoining property regardless of zoning classification.
<input type="checkbox"/>	Area of subject property shown in acreage and square feet.
<input type="checkbox"/>	Number of lots into which the property is to be subdivided, if applicable.
<input type="checkbox"/>	Existing use of subject property regardless of zoning classification.
<input type="checkbox"/>	Width of abutting roadway (right-of-way, cartway, improved, or unimproved)
<input type="checkbox"/>	Is lot in a subdivision, please check <input type="checkbox"/> YES or <input type="checkbox"/> NO If yes, show lot number(s), section number, name and recording information of subdivision.
<input type="checkbox"/>	Date of plan.
<input type="checkbox"/>	Description using the dimensions as shown on the plan.
<input type="checkbox"/>	One copy of the Petition and Proposed Ordinance stapled to each copy of the Plan.
<input type="checkbox"/>	Proof that the applicant has notified all adjacent property owners and residents in the immediate area who can potentially be affected by the petition.
<input type="checkbox"/>	Other information required by the Bensalem Township Zoning Officer, please note here:
<input type="checkbox"/>	One copy of the Petition and Proposed Ordinance stapled to each copy of the Plan.
SUBMISSION IS TO INCLUDE A DISC WITH APPLICATION AND PLAN(S) IN PDF FILE FORMAT OR EMAIL SAME TO jmryan@bensalem-township.org	

SIGNATURES REQUIRED:

Engineer/Surveyor

Date

Attorney

Date

Applicant

Date



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Petition for Change of Zoning

Application is hereby made by the undersigned. Enter the names and addresses of petitioner:

For an amendment to the Bensalem Township Zoning Ordinance of 1954, as amended, and the Bensalem Township Zoning Map, the said applicant represents:

1. That he/she/it/they, is/are the owner(s) of that portion of land situated in Bensalem Township which is described as follows:

A plan or sketch of said premises showing adjoining owners is hereto attached.

2. The said premises are located in a section of the township which is presently zoned as a(n) _____ district and is situated at _____
(insert present zoning classification) *(insert address and/or location of property and tax parcel #)*
in said township.

3. The reason(s) your petitioner desires a change in zoning classification is/are follows:

4. Your petitioner requests his/her/it's/aforesaid premises to be changed in zoning classification from a _____ district to a _____ district.
(insert present zoning classification) *(insert proposed zoning classification)*

5. In accordance with the Zoning Fee Schedule adopted by your Board, your petitioner submits herewith Two Thousand Five Hundred Dollars (\$2500.00) in cash or check.

Respectfully submitted.

Signature

Date

A COPY OF THIS APPLICATION WITH SIGNATURES IS REQUIRED TO BE SUBMITTED

Note: If the applicant is a partnership or corporation, the name thereof shall be inserted in the above space provided for signatures, and the petition shall be signed on behalf of such partnership or corporation by a duly authorized partner or officer thereof.



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Petition for Change of Zoning

State of Pennsylvania

ss:

County of Bucks

Name(s) of petitioner(s) or authorized partner or officer

Being duly sworn according to the law, deposes and says that he/she is the petitioner, is a duly authorized partner or officer of the above-named partnership or corporation; that the petitioner is the owner of the premises described in the foregoing application and the facts set forth in the foregoing petition are true and correct as he/she verily believes.

Signature

Date

Sworn and subscribed before me this _____ day
of _____, AD 20 _____

My commission expires: _____

Notary Public



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Petition for Change of Zoning

ORDINANCE No. _____

An ordinance of Bensalem Township, Bucks County, Pennsylvania further amending the Bensalem Township Zoning Ordinance December 6, 1954 as amended, and the zoning classification of Tax Map Parcel(s) No. _____ of the said zoning map from _____ to _____

Whereas, on petition of _____

a public hearing was held for the purpose of considering the petition of the said _____

to amend the Bensalem Township Zoning Ordinance of 1954 as more particularly set forth herein and whereas, the Bensalem Council after a public hearing deems it appropriate that the zoning classification of the hereinafter described Tax Map Parcel(s) located in the Township of Bensalem be changed from _____ to _____ so that the change will be in accordance with the spirit and intent of the Bensalem Township Zoning Ordinance adopted the 6th day of December 1954.

Now, therefore, be it enacted and ordained, and , and it is hereby enacted and ordained that:

1. The Zoning Classification of Tax Map Parcel(s) No. _____ shall be changed from _____ to _____
The description of said Tax Map Parcel(s) No. _____ is attached hereto by number and labeled in accordance therewith, and is hereby incorporated herein as though set forth in full.
2. The Zoning Map of Bensalem Township shall be changed, corrected, and marked in accordance with the provisions of this ordinance, so that the same shall hereinafter show the aforesaid described portion of Bensalem Township to be classified as: _____
3. This ordinance shall become effective five (5) days after its enactment.

Ordained and enacted this _____ the day of _____ 20 _____

Bensalem Township Council

Attest:

Council Clerk

EXHIBIT "A"

LEGAL DESCRIPTION OF PROPERTY