City of Philadelphia Zoning Board of Adjustment



Application for Appeal

WHEN COMPLETED, MAIL TO:

CITY OF PHILADELPHIA Department of Planning & Development
Zoning Board of Adjustment
One Parkway Building
1515 Arch St, 18th Floor
Philadelphia, PA 19102

| CALENDAR # | (FOR OFFICE USE ONLY) | Philadelphia, PA 19102 | | | | |
|--|--|---|--|--|--|--|
| | APPLICANT MUST COMPLETE ALL INFORMATION BELOW. PRINT CLEARLY AND PROVIDE FULL DETAILS | | | | | |
| LOCATION OF PROPERTY (LEGAL ADDRESS) 540 W mpreland Are | | | | | | |
| PROPERTY OWNE | ER'S NAME: | PROPERTY OWNER'S ADDRESS (INCLUDE CITY, STATE, AND ZIP) | | | | |
| OHNI | SLLC | 1315 walnut St +100 | | | | |
| PHONE #: | 2156094163 | 1 1 | | | | |
| Som | IMPAINENTIL AMA | 1911a 19107 | | | | |
| E-MAIL: VE | 5/1/1/A/10/30/19.00 | 4 | | | | |
| | A CORPORATION MUST BE REPRESENTED BY AN AT | I TORNEY LICENSED TO PRACTICE IN PENNSYLVANIA | | | | |
| APPLICANT: APPLICANT'S ADDRESS (INCLUDE CITY, STATE, AND ZIP) | | | | | | |
| VEIN | ANAS (ASID | 1315 WALNUT ST #100% | | | | |
| FIRM/COMPANY: | ANASTALID Law | 19107 | | | | |
| PHONE #: 21 | 5 609 4.165 | E-MAIL: | | | | |
| RELATIONSHIP TO C | DWNER: O TENANT/LESEE ATTORNEY O DESI | GN PROFESSIONAL O CONTRACTOR O EXPEDITOR OTHER | | | | |
| APPEAL RELATED TO ZONING/USE REGISTRATION PERMIT APPLICATION # 2020 - 009675 | | | | | | |
| IF A VARIANC | IF A VARIANCE IS REQUESTED, PLEASE PROVIDE AN EXPLANATION OF EACH OF THE FOLLOWING CRITERIA ASREQUIRED FOR THE GRANTING OF A VARIANCE: | | | | | |
| Does compliance with the requirements of the zoning code cause an unnecessary hardship due to the size, shape, contours or physical dimensions of your property? Did any action on your part cause or create the special conditions or circumstances? Explain. | | | | | | |
| you. The writte is Tust at one point. The | | | | | | |
| property opens up grasually. | | | | | | |
| Will the variance you seek represent the least modification possible of the code provision to provide relief from therequirements of the zoning code? | | | | | | |
| Explain. | | | | | | |
| merely relocating lot lines. | | | | | | |
| | | | | | | |
| Will the variance you seek increase congestion in public streets or in any way endanger the public? Explain. | | | | | | |
| | | | | | | |
| 0 1/2 | 1 | | | | | |
| n va | | | | | | |
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| | | | | | | |

| Will the variance you seek substantially or permanently harm your neighbors' use of their properties or impair anadequate supply of light and air to those properties? Explain. | | | | | |
|--|--|--|--|--|--|
| No- | | | | | |
| | | | | | |
| Will the variance you seek substantially increase traffic congestion in public streets or place undue burden on water, sewer, school park or other public facilities? Explain. | | | | | |
| No - | | | | | |
| | | | | | |
| Will the variance you seek create environmental damage, pollution, erosion, or siltation, or increase the danger offlooding? Explain. | | | | | |
| No- | | | | | |
| REASONS FOR APPEAL: | | | | | |
| This is A very large lot and A SUBDIVISION MAKES Practical Sense, | | | | | |
| Sense, | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| I hereby certify that the statements contained herein are true and correct to the best of my knowledge and belief. I understandthat if I knowingly make any false statements herein I am subject to possible revocation of any licenses issued as result of myfalse application, and such other penalties as may be prescribed by law. | | | | | |
| Applicant's Signature: Date: Date: Month Date YEAR | | | | | |
| City of Philadelphia | | | | | |
| Zoning Board of Adjustment Application for Appeal | | | | | |
| 11-49 (2) (Rev. 06/13) Page 2 of 2 | | | | | |



Notice of:

□ Referral

| Application Number: ZP-2020-009675 | Zoning District(s): RSD1 (Overlays: Open Space and Natural Resources - Steep Slope Protection, WWO Wissahickon Watershed Overlay District) | Date of Refusal: 2/26/2021 | |
|--|--|----------------------------|--|
| Address/Location: 540 W MORELAND AVE, Ph Parcel (PWD Record) | Page Number Page 1 of 1 | | |
| Applicant Name: Vern Anastasio DBA: ALAWPHILLY, LLC | Applicant Address: 1315 Walnut Street Suite 1006 Philadelphia, PA 19107 USA | | |

Application for:

FOR THE RELOCATION OF LOT LINES TO CREATE TWO (2) LOTS (PARCEL B AND PARCEL C) FROM EXISTING ONE (1) LOT (540 W MORELAND AVE.); FOR THE EXISTING USE OF SINGLE FAMILY HOUSEHOLD LIVING AT PARCEL B AND FOR THE COMPLETE DEMOLITION OF EXISTING BUILDING FOR THE USE AS VACANT LOT AT PARCEL C (SIZE AND LOCATION AS SHOWN ON PLANS).

The permit for the above location cannot be issued because the proposal does not comply with the following provisions of the Philadelphia Zoning Code. (Codes can be accessed at www.phila.gov.)

| Code Section(s): | Code Section Title(s): | Reason for Refusa | Reason for Refusal: | |
|---|-------------------------|-------------------|---------------------|--|
| Table 14-701-1 | Minimum Lot Width (ft.) | REQUIRED | PROPOSED | |
| - 10 Oct | (Parcel B) | 75 ft. | 15 ft. | |

ONE (1) ZONING REFUSAL

Fee to File Appeal: \$300

Parcel Owner:

GANOS LLC



REEBA MERIN BABU PLANS EXAMINER

DATE SIGNED



City of Philadelphia Project Information Form

PIF Confirmation Page

Thank you for submitting your information. A copy of this information will be sent to your e-mail address. If you entered in any of this information incorrectly, please complete and **submit a new form** with the updated information.

NOTE TO APPLICANTS: You **MUST** print out your completed Project Information Form (PIF) and submit it to the Zoning Board of Adjustment (ZBA) with your appeal paperwork. Per Section §14-303 (15)(a)(.3)(.A) of the Philadelphia Code, "an applicant who seeks either a special exception or a variance must submit to the Board, at the time the appeal is filed, a copy of the Project Information Form for such application, if the preparation of a Project Information Form is required for such application..."

View all projects submissions.

PRINT YOUR FORM

Applicant Information

Address of Development Project

540 W MORELAND AVE

Council District #

8

Name of Applicant

VERN ANASTASIO

Zoning Application Number

Address of Applicant

1315 WALNUT STREET SUITE 1006 PHILADELPHIA, PA 19107

Contact Information

Is the contact person the same as applicant?

Yes

Name of Contact Person

VERN ANASTASIO

Phone Number of Contact Person

(215) 609-4165

Email Address of Contact Person

VERN@ALAWPHILLY.COM

Project Information

Is your project exclusively residential?

Yes

Does your project contain three or fewer units?

Yes

Sign & Submit

Agreement:

I understand that all information submitted on this form is public information.

Printed Name of Applicant

VERN ANASTASIO

Please sign with the Initials of the Applicant

Date

03/26/2021

Feedback

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