



# City of Harrisburg Planning & Zoning Code Amendment Application

*Note: The Planning Bureau must review all applications for completeness.  
Contact Jennifer Boyer at 717- 255-6637 or [jboyer@cityofhbg.com](mailto:jboyer@cityofhbg.com) to schedule a meeting.*

Amendment Title, or Project Name or Plan Title to which this request is related

Section(s) to be amended

Please explain the purpose of the request. Provide as much information and be as specific as possible.  
(Use Additional Sheets If Necessary)

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## Applicant

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

**Main Contact for the Request**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

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**Items To Be Submitted With This Application:**

Failure to do so WILL delay the review process.

- Check made payable to the **“City Treasurer”** in the amount of \$850.
- Twenty-one (21) copies of text to be amended, with deletions struck through, ~~example~~, and additions underlined, example.

**APPLICANT CERTIFICATION**

**I hereby certify that the proposed request is authorized and that I agree to conform to all applicable laws of this jurisdiction. I understand that any falsification could lead to denial or criminal penalties, or revocation of any permit pursuant to this application. I agree that work will not commence prior to final approval.**

\_\_\_\_\_  
Applicant’s Signature

\_\_\_\_\_  
Date