

ZONING HEARING BOARD #

PROJECT #

To Whom It May Concern:

I understand that the decision of the Zoning Hearing Board concerning the matter for which this Building and/or Zoning Permit is issued may be appealed by any interested party within thirty (30) days of said decision.

I further understand that any work done under said Permit within the thirty (30) day appeal period is at my own risk, and that I will not hold Middletown Township responsible, financially or otherwise, for any delay, loss or injury which may occur as the result of such appeal.

I further understand that, if such an appeal is made, said Permit will be revoked until such time as the appeal has been resolved.

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Signature

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Date