

APPLICATION TO THE BOARD OF ZONING APPEALS

VIOLET TOWNSHIP, FAIRFIELD COUNTY, OHIO

(Ten Copies Required)

CONDITIONAL USE PERMIT

Date _____	Case Number _____
Applicant _____	Property Owner _____
Street Address _____	Street Address _____
City _____	City _____
Phone Number _____	Phone Number _____

In accordance with the provisions of the Zoning Code of Violet Township, Fairfield County, Ohio, I hereby apply to the Board of Zoning Appeals for a Conditional Use Permit applicable to the subject premises.

PLEASE COMPLETE THE FOLLOWING QUESTIONS THOROUGHLY AND COMPLETELY

1. Address of Property. Legal Description of subject property to be attached.

2. Parcel Number(s) _____
3. Existing Zoning _____
4. Existing use of subject property:

5. State the proposed use of the subject property.

6. In what way will proposed use affect subject property and adjacent properties?

7. Set forth any other information pertaining to your request.

8. This application involves the following modifications of the Zoning Code:

Page(s) _____ Section(s) _____

9. Attachments and additional information required:

- A. Provide a list of property owners within 500 feet of subject property, in accordance with the Fairfield County Auditors' current tax list and shall include the addresses of all property owners.
- B. A plan of the proposed site for the conditional use showing the location of all buildings, parking and loading areas, streets and traffic accesses, open spaces, refuse and service areas, utility, signs, yards, landscaping features, septic tanks, leaching areas, if existing all underground storage tanks and such information the Board may require.
- C. A current and accurate survey or suitable drawing, drawn to scale, that depicts the property size and boundaries and the size, location and use of all existing and proposed structures and land for both the subject tract and adjacent property (adjacent property/existing structures and land only).
- D. Application fee payable to Violet Township Board of Trustees.

Signature of Applicant

Signature of Property Owner
(If different from Applicant)

NOTE: Submittal of this application does not imply nor guarantee approval by the Violet Township Board of Zoning Appeals. Approval or denial of any application is at the sole discretion of the Board of Zoning Appeals. It is recommended that a representative for this application be present at the public hearing.