APPLICATION TO THE BOARD OF ZONING APPEALS

VIOLET TOWNSHIP, FAIRFIELD COUNTY, OHIO
(Ten Copies Required)

APPLICATION FOR VARIANCE AND APPEAL

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 Variance of the Zoning Resolution of the Violet Township, Fairfield County, Ohio 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. Proposed use of subject property.


7. This application involves the following modifications of the Zoning Code:
   Page(s) ________________, Section(s) ____________________
8. Reason applicant is requesting variance.
_________________________________________________________________________________
_________________________________________________________________________________

9. Unusual conditions of subject property which supports need for variance.
_________________________________________________________________________________
_________________________________________________________________________________

10. What hardship will be created if Variance is not granted?
_________________________________________________________________________________
_________________________________________________________________________________

11. Set forth any other information pertaining to your request.
_________________________________________________________________________________
_________________________________________________________________________________

12. Attachments and additional information required:
   A. Provide a list of property owners adjacent to (including those directly across the street from) the subject property, in accordance with the Fairfield County Auditors’ current tax list and shall include the addresses of all property owners.

   B. 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 the subject tract.

   C. Map showing the location of subject property.

   D. Application fee payable to Violet Township Board of Trustees.

The undersigned states that the approval of this application is necessary for the preservation and enjoyment of substantial property.

_________________________________________  _____________________________
Signature of Applicant                  Signature of Property Owner
(If different from Applicant)

NOTES: 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.

Members of the Violet Township Board of Zoning Appeals may visit the subject property prior to the public hearing.

Certificate of Zoning Compliance and Building Permits must be obtained prior to commencement of new construction.