

APPLICATION FOR VARIANCE
Board of Zoning Appeals

_____, Ohio

Application Number: _____

1. **Name of Applicant:** _____

Mailing Address: _____

Phone Number: Home: _____ Business: _____

2. **Locational Description:** Subdivision Name: _____

Section: _____ Township: _____ Range: _____

Other Designation: _____ Block: _____ Lot No.: _____

(If not in a platted subdivision attach a legal description.)

3. **Nature of Variance:** _____

In addition, plans in triplicate and drawn to scale must accompany this application showing dimensions and shape of the lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings or alterations, and any natural or topographic peculiarities of the lot in question.

4. **Justification of Variance:** In order for a variance to be granted, the applicant must prove to the Board of Zoning Appeals that the following items are true:
(Please attach this information on separate sheets.)

- a. Special conditions exist peculiar to the land or building in question;
- b. That a literal interpretation of the Resolution would deprive the applicant of rights enjoyed by other property owners in same district;
- c. That the special conditions do not result from previous actions of the applicant; and
- d. That the requested variance is the minimum variance that will allow a reasonable use of the land or buildings.

I certify that the information contained in this application and its supplements is true and correct.

DATE: _____

APPLICANT