Variance or Conditional Use Application

RAVENNA TOWNSHIP ZONING

6115 S. Spring Street Ravenna, Ohio 44266 Phone: (330) 296-9616 Fax: (330) 297-9138

www.ravennatownship.com

Township Use Only:
Parcel #
Date Received:
Zoning District
BZA Case #
Fee Paid

Date: _		Property Address:
Applica	ant's Name:	Applicant's Phone #:
Applica	ant's Email Address:	
Proper than a		Please fill out below IF address, name or phone is different
Name:		Address:
Email <i>i</i>	Address:	Phone #:
Please be acc		information accurately, if not completed, application will not
1)	State the current Zon	ng District property is in:
2)	State the current use	of property:
3)	Provide the neighboring across street)	g property owners names & addresses: (left, right, rear,
	Left Side:	
	Across Street:	

4.) Describe the <i>pr</i>	oposed use of t	he property, including all proposed construction:		
5.) Describe the impact of the requested Variance(s) and/or Conditional Use permadjoining property owners and the Township, considering the effect of such element noise, light, odor, vibration and traffic, and how the variance will be compatible with adjacent properties in the district:				
		If the following information is NOT received at the ownship Zoning Office, the application will be con		
incomplete, and a	public hearing wil	I not be scheduled:		
1.) Completely fill	out the above app	olication, if the question does not apply to your		
application, use	e N/A.			
2.) Detailed Site P	lan:			
a. Provide	eight (8) color	copies of the site plan		
b. Site pla	n <u>MUST</u> include:			
i	All property boun	dary lines		
ii.	All dwellings and	accessory structures that currently exist on the pr	operty	
iii.	The proposed str	ucture (if needed) including all setbacks		
3.) Pictures & any	miscellaneous pa	aperwork for the Board members (if applicable)		
a. <u>Provide</u>	e eight (8) color	copies of each		
4.) Appropriate ap	plication fee, <i>exa</i>	ct cash or check made out to Ravenna Township		
ertify that the inform	ation contained ir	n this application and its supplements is accurate	and	
e. The Owner/Appli	cant as signed be	low, hereby authorizes Ravenna Township		
oresentatives to visit	, photograph, and	d post a notice on the property described in this		
plication.				
pplicant	Date	Property Owner	Date	
ning Inspector	Date	-		