

APPLICATION # V-\_\_\_\_\_

**APPLICATION FOR VARIANCE**

BOARD OF ZONING APPEALS

AUGLAIZE TOWNSHIP, ALLEN COUNTY, OHIO

DATE APPLICATION RECEIVED BY ZONING INSPECTOR: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

Address of Property Needing VARIANCE: \_\_\_\_\_

\_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Description or nature of variance requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Present Zoning District: \_\_\_\_\_

Statement establishing and substantiating that the variance conforms to Section 17.4.5 of the Auglaize Township Zoning Resolution: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The following documents must be attached:

1. Legal description of property (Exhibit A).
2. A list of the adjoining property owners, their mailing addresses and phone numbers (Exhibit B).
3. A sketch of the land, with accurate dimensions, showing location of all buildings, parking and loading areas, streets and traffic access, open spaces, refuse and service area, utilities, signs, yards, landscaping features (Exhibit C).
4. Any other information the Board of Zoning Appeals may require for the purpose of providing the fullest practicable presentation of facts.