

BZA-1 (Application)
(To be filed by applicant)

Board of Appeals Case No. _____
Filed: _____

DELAWARE COUNTY ZONING REGULATIONS
50 CHANNING STREET-DEPT. 6015
DELAWARE, OHIO 43015
740 833-2200

APPLICATION FOR VARIANCE
DELAWARE COUNTY BOARD OF ZONING APPEALS

NOTE: This application must be filed in duplicate with the Zoning Inspector who will transmit one copy to the Board of Appeals and application fee of \$250.00.

SECTION 31.06 - Procedure for Application of Variance: The County Board of Zoning Appeals, appointed by the County Commissioners, may upon application, grant such variances from the provisions or requirements of this resolution as will not be contrary to the public interest.

Where, by reason of the exceptional narrowness, shallowness or unusual shape of a specific piece of property on the effective date of this resolution, or by reason of exceptional topographic conditions, or other extraordinary situations or conditions of such parcel of property, or of the use or development of property immediately adjoining the property in question, the literal enforcement of the requirements of this resolution would involve practical difficulty the Board shall have power to authorize a variance from the terms of this resolution.

The applicant must file herewith an explicit statement setting forth:

- (a) Description of variance requested.
- (b) A clear and accurate description of proposed work or use.
- (c) Specific reference to the section of the Zoning Resolution under which it is claimed permit should be issued.
- (d) Names and addresses of owners of land within 500 feet.
- (e) Plans drawn to scale, showing the actual shape and dimensions of the lot, buildings and accessory buildings existing, the existing and intended use of each building or part of a building, and such other information with regard to the lot and neighboring lots as may be necessary to determine and provide for the proper hearing of the application.

Name of Owner: _____ Signature (required): _____

Telephone-Home: _____ Work: _____

Address: _____

Name of Lessee: _____ Signature: _____

Telephone-Home: _____ Work: _____

Address: _____

Name of Applicant: _____ Signature: _____

Telephone-Home: _____ Work: _____

Address: _____

Address of Property: _____

Township: _____

Range: _____ Twp: _____ Section: _____ Farm Lot#: _____ 12/07