

JEFFERSON TOWNSHIP, CRAWFORD COUNTY, OHIO

APPLICATION NO. _____

APPLICATION FOR A CONDITIONAL ZONING PERMIT
(File in Duplicate)

THIS APPLICATION, WHEN PROPERLY APPROVED, SHALL CONSTITUTE A CONDITIONAL ZONING PERMIT.

NAME OF APPLICANT _____

ADDRESS _____

PHONE NUMBER _____

LOCATION OF LAND FOR WHICH CONDITIONAL PERMIT IS SOUGHT _____

ZONING DISTRICT _____

SECTION OF RESOLUTION INVOLVED _____

Date

Applicant Signature

ATTACH A SITE PLAN SHOWING:

- BOUNDARIES OF PROPERTY
- ABUTTING STREETS OR ROADS
- EXISTING STRUCTURES
- PROPOSED STRUCTURES

ACTION OF BOARD OF ZONING APPEALS

CONDITIONAL ZONING PERMIT GRANTED/DENIED

CONDITIONS (IF ANY) UPON WHICH PERMIT IS GRANTED:

Date

Chairman, Board of Zoning Appeals