

APPLICATION FOR CONDITIONAL USE
BOARD OF ZONING APPEALS
WASHINGTON TOWNSHIP, LOGAN COUNTY, OHIO

The undersigned requests a conditional use permit for the use specified below. Should this application be approved, it is understood that it shall only authorize that particular use described on this application and any conditions or safeguards required by the Board. If this use is discontinued for a period of more than six months, this permit will automatically expire.

Name of Property Owner(s) _____

Mailing Address _____

Phone Number(s) Home _____ Business _____ Cell _____

Name of Applicant(s) _____

Mailing Address _____

Phone Number(s) Home _____ Business _____ Cell _____

Location Description: Parcel #(s) _____ Zoning District _____

Existing Use(s) _____

Description of Proposed Conditional Use _____

Supporting Information to be provided by the applicant: Attach a plan for the proposed use, showing the location of building(s), parking and loading areas, traffic access and circulation drives, open space, landscaping, utilities, signs, yards, refuse and service areas, all with dimensions to the property lines. Also a copy of the property survey and deed are required. Attach a narrative statement relative to the above requirements and also explain the economic, noise, glare, any odor effects on the adjoining properties and the general compatibility with adjacent and other properties in the district.

Date _____
_____ Owner

Date _____
_____ Applicant

For Official Use Only
Date Filed _____ Date of Notice to Parties in Interest _____

Date of Notice in Newspaper _____ Payment Amount & Type _____