



Zoning Department

Application for Zoning Variance



Property Information	
Site Address	
Parcel ID(s)	Zoning
Township	Acreage
Water Supply D Public (Central) D Private (Onsite)	Wastewater Treatment D Public (Central) D Private (Onsite)

Applicant Information	
Name/Company Name	
Address	
Phone #	Fax #
Email	

Property Owner Information	
Name/Company Name	
Address	
Phone #	Fax #
Email	

Agent Information (if applicable)	
Name/Company Name	
Address	
Phone #	Fax #
Email	

Staff Use Only
Case #
Date filed:
Fee paid
Receipt #
Received by:
Hearing date:
Zoning Compliance:

Document Submission
The following documents must accompany this application:
<input type="checkbox"/> Completed application
<input type="checkbox"/> Fee Payment (Checks only)
<input type="checkbox"/> Auditor's map (8 1/2" x 11")
<input type="checkbox"/> Site Map (max 11" x 17")
<input type="checkbox"/> Covenants and deed
<input type="checkbox"/> Notarized signatures
<input type="checkbox"/> Proof of water & waste water supply
Please see the Application Instructions for complete details

Case #

Variance(s) Requested	
Section	
Description	
Section	
Description	
Section	
Description	

Describe the project

NOTE: To receive a variance, you must meet all the variance requirements in Section 810.04 of the Blendon Township Zoning Resolution. Your answers to the following questions will help the Board of Zoning Appeals determine whether you meet the requirements for a variance. If you don't answer the questions, we will consider your application incomplete.

1. Are there special conditions or circumstances applying to the property involved that do not generally apply to other properties in the same zoning district.

2. That a literal interpretation of the requirements of this Zoning Resolution would deprive the applicant of rights commonly enjoyed by other properties in the same Zoning District under the terms of the Zoning Resolution.

3. That the special conditions and circumstances, listed under question #1, do not result from any actions of the applicant.

4. That approving the variance requested will not grant the applicant any special privilege that is denied by this Zoning Resolution to other lands or structures in the same Zoning District.

5. Would granting the variance adversely affect the health or safety of persons residing or working in the vicinity of the proposed development, be materially detrimental to the public welfare, or injurious to private property or public improvements in the vicinity?

6. Can there be any beneficial use of the property without the variance?

7. How substantial is the variance? (*i.e.* 10 feet vs. 100 feet - Required frontage vs. proposed)

8. Would the essential character of the neighborhood be substantially altered or would the adjoining properties suffer substantial harm as a result of the variance?

9. How would the variance adversely affect the delivery of governmental services?
(*e.g., water, sewer, garbage, fire, police - Verification from local authorities – i.e. fire might be required*)

10. Did the applicant purchase the property with knowledge of the zoning restrictions?

11. Could the applicant's predicament feasibly be obtained through some method other than a variance?

12. Would the spirit and intent behind the zoning requirement be observed and would substantial justice be done by granting the variance?

Case #

Affidavit

I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the Township. I hereby certify that I have read and fully understand all the information required in this application form.

Applicant _____ Date

Property Owner (Signature must be notarized) _____ Date

Property Owner (Signature must be notarized) _____ Date

***Agent must provide documentation that they are legally representing the property owner.**

****Approval does not invalidate any restrictions and/or covenants that are on the property.**

Application instructions

Please submit the following:

1) **Application Form**

Completed application form with notarized signatures

2) **Fee – non refundable**

Checks only payable to *Blendon Township Board of Trustees*

3) **Covenants or deed restrictions.**

Provide a copy of your deed with any deed restrictions

You can find your deed at:

www.franklincountyohio.gov/recorder

4) **Auditor’s Tax Map.**

Provide a map showing the subject property and all land within 500 feet of the property.

You can find the map at:

www.franklincountyohio.gov/auditor

5) **Site map**

Provide a map showing the subject property with the following items:

- For the subject property
 - All property lines
 - Dimensions of the property
 - Road frontage
 - Street right-of-ways
 - Driveways
 - Easements
 - Floodplain areas
 - Location of existing septic/aerator systems and wells
- For all existing and proposed buildings and structures
 - Location of each on the property
 - Location of any proposed addition or expansion
 - Square footage of each
 - Height of each
 - Distance to property lines
- Scale
- North arrow
- Any information relevant to the specific nature of the variance

6) **Proof of utility service**

Provide proof from the provider of your water and wastewater services.

Note: If services are provided by a private or public entity, you must provide a letter verifying that you have service or will have access to it. If you’re proposing an on-lot septic system or well, please provide information from the Franklin County Board of Health (or appropriate agency).