Application No. _____

APPLICATION FOR AN AREA VARIANCE

MANTUA TOWNSHIP, PORTAGE COUNTY

To: The Chairman of the Board of Appeals:

On _____/____/_____, I _____

was refused a zoning certificate by the Zoning Inspector of Mantua Township for;

_____

Intended use

_____

Address

_____R-1 _____R-2 _____R-3 _____C _____LRM _____I _____

Zoning Subdivision (check)

I now make application to the Mantua Township Board of Zoning Appeals for an Area Variance.

Name of legal land owner _____

Address_____

Telephone_____

State the Area Variance requested _____

_____

Section and number of Zoning Resolution that the intended use violates: _____

_____

Briefly, state your reasons for the request: _____

_____

_____

_____

_____

You may attach an expanded statement and appear and explain your request at the hearing.

When did you purchase the property? _____

What was the zoning classification at the time of purchase? _____

I understand I am requested to attend the public hearing and state my reasons for requesting the hearing and facts to support the request. I understand I may be represented by my authoritzed agent with power of Attorney for this purpose unless my attendance is required by the Board.

My authorized agent is: _____

Address: _____

Telephone/e-mail _____/_____

Date: _____ Signature: _____

You will need to attach the following:

1) Filing fee of _____ payable to: Mantua Township Trustees (non-refundable).
2) Your application for zoning certificate that was rejected and signed by the Zoning Inspector.
3) Include new plat map; to be obtained from the Portage County Tax Map Office by the applicant.
4) Include a clearly drawn, reproducible map showing land and pertinent features; important to the request. Show the location of all existing and proposed structures, the types of buildings and their existing and proposed uses, complete plans and specifications including all dimensions for all proposed development and construction.
5) Include a statement evaluating the effect and compatibility on adjacent properties.
6) Include the legal description of the property, as it appears on the deed.
7) Include the names and addresses of all adjoining property owners including those across the street.
8) Include a brief response to each of the following standards:
   a) Will the property yield a reasonable return, or can there be a beneficial use of the property without the variance?

      _____

      _____

   b) Is the variance substantial?

      _____

      _____

c) Would the essential character of the neighborhood be substantially altered or adjoining properties suffer a substantial detriment as a result of the variance?

_____

_____

d) Will the variance adversely affect the delivery of government services?

_____

_____

e) Did the property owner purchase the property with the knowledge of the zoning restrictions? _____

_____

f) Can the problem be solved by some manner other than the granting of the zoning variance?_____

_____

g) Does the variance preserve the spirit and intent of the Zoning Resolution and, will substantial justice be done by granting the variance?

_____

_____

NOTE:

NO ACTION WILL BE TAKEN IF THE INFORMATION AND MATERIALS ARE NOT SUPPLIED OR IF THE FORM IS NOT FILLED OUT COMPLETELY

Send to the Board of Zoning Appeals Chairman.

PLEASE DO NOT WRITE IN THE FOLLOWING SECTION

FOR OFFICIAL USE ONLY

Summary Hearing Record:

Date advertised: _____

Date of hearing: _____

Operative motions(s)

Vote on:	Motion 1.	Motion 2.	Motion 2.
M_____	_____	_____	_____
M_____	_____	_____	_____
M _____	_____	_____	_____
M _____	_____	_____	_____
M _____	_____	_____	_____

Decision of Board: _____

_____

Facts found and reasons for decisions: _____

_____

Entry in record of board on (date) _____

By _____

Attest: _____