

BOARD OF ZONING APPEALS (BZA)

APPLYING FOR A VARIANCE

In order to process your application, the following items are needed:

Fee: \$300; non-refundable

1. This application must be submitted by the 14th of the month for the following month's hearing. You will be contacted with the hearing date.
2. Name, address, zip code, phone number and email of the applicant.
3. Drawings / Site Plans – 8 copies
4. List of neighbors or property owners adjacent to both sides and rear, and property in front of (across the street from) the premises which are subject of this appeal.

Applicant _____ Phone _____

Email _____

Mailing Address _____

Address of Property Affected _____

If different than above:

Owner of premises affected _____ Phone _____

Mailing Address of Owner _____

BOARD OF ZONING APPEALS (BZA)

Nimishillen Township, Stark County, Ohio

Notice of Appeal

I hereby appeal to the Board of Zoning Appeals the refusal of a zoning certificate by the Township Zoning Inspector for the reason that:

- a. There was the following error in said decision:_____

- b. A variance should be allowed in this case to avoid unnecessary hardship because:_____

Appellant

Date Notice of Appeal filed: _____

Date of Notice to parties in interest: _____

Date of Hearing: _____

Decision of BZA: _____

Date of Decision of BZA _____

(within thirty (30) days after case is submitted)

Attest: Board of Zoning Appeals

Secretary by _____
Chairman

BOARD OF ZONING APPEALS (BZA)

The following are all of the individuals, firms or corporations owning property adjacent to both sides and rear, and property in front of (across the street from) the premises which are subject of this appeal. Check the tax records in County Court House if not known. Use additional sheet if required.

| NAME | ADDRESS |
|------|---------|
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| 11. | |
| 12. | |

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Example Site (plan is not to scale)

