



6701 GREENWICH ROAD
P. O. BOX 750
WESTFIELD CENTER, OH 44251
330-887-5151

VARIANCE PETITION APPLICATION

The Zoning Inspector must approve the application and all appropriate fees (Exhibit V, Fee Schedule) must be paid before a meeting can be scheduled.

APPLICANT'S NAME: _____
APPLICANT'S ADDRESS: _____
APPLICANT'S TELEPHONE NUMBER: _____
APPLICANT'S SIGNATURE: _____ DATE: _____
PROPERTY OWNER INFORMATION (IF NOT APPLICANT):
PROPERTY OWNER'S NAME: _____
PROPERTY OWNER'S ADDRESS: _____
PROPERTY OWNER'S TELEPHONE NUMBER: _____
PROPERTY OWNER'S SIGNATURE: _____ DATE: _____

PROPERTY ADDRESS: _____

PARCEL NUMBER: _____ ZONING DISTRICT: _____

CURRENT USE OF PROPERTY: _____

SITUATED IN THE VILLAGE OF WESTFIELD CENTER, OHIO, I HERBY PETITION FOR A VARIANCE ON THE ABOVE DESCRIBED PREMISES: (DESCRIBE REASON FOR VARIANCE REQUEST AND INCLUDE APPLICABLE SECTION(S) OF THE ZONING CODE.)

SUCH VARIANCE WILL NOT BE DETRIMENTAL TO THE PUBLIC WELFARE OR TO THE PROPERTY OF OTHER PERSONS LOCATED IN THE VICINITY THEREOF BECAUSE:

To ensure that your application will not be returned as incomplete, please attach the following documentation:

EIGHT (8) COPIES: BUILDING PLANS (NO LARGER THAN 11X17) SHOWING GROUND GRADE AT EACH ELEVATION (IF APPLICABLE) OF THE BUILDING, FOUNDATION, DRIVEWAY AND PARKING AREA. THE TOTAL SQUARE FOOTAGE OF THE PROPOSED STRUCTURE/BUILDING (INCLUDE THE SQUARE FOOTAGE OF EACH LEVEL, IF APPLICABLE).

EIGHT (8) COPIES: PROFESSIONAL SITE PLAN (NO LARGER THAN 11X17) DRAWN TO SCALE OF ONE INCH (1") EQUALS ONE HUNDRED FEET (100'), IDENTIFIES THE CONSTRUCTION TO TAKE PLACE AND INCLUDE ALL **LOT DIMENSIONS AND SETBACKS** OF THE PROPOSED STRUCTURE/BUILDING TO BE BUILT. THE SITE PLAN MUST ALSO INCLUDE ANY EXISTING STRUCTURE/BUILDING AND THE **DIMENSIONS, SQUARE FOOTAGE AND SETBACKS** OF EACH. THE SITE PLAN MUST BE STAMPED AND SIGNED BY THE SURVEYOR.

NOTE: ALL PROPERTY OWNERS CONTIGUOUS TO THE PROPERTY WILL BE NOTIFIED OF THE MEETING DATE AND TIME. THE PROPERTY OWNER IS REQUIRED TO ATTEND THE HEARING.

OFFICE USE ONLY

VERIFICATION OF RECEIPT OF FEES:

FEE	PAYMENT METHOD	DATE PAID	PAY-IN NUMBER

HEARING DATE AND TIME: _____/_____

APPLICANT/PROPERTY OWNER NOTIFIED OF HEARING DATE AND TIME: _____

CONTIGUOUS PROPERTY OWNERS NOTIFIED OF HEARING DATE AND TIME: _____

HEARING DATE AND TIME ADVERTISED: _____

HEARING DATE AND TIME POSTED TO VILLAGE WEBSITE: _____