

## APPLICATION INSTRUCTIONS FOR A CONDITIONAL USE REQUEST OF THE BOARD OF ZONING APPEALS

The applicant for a request of the Board of Zoning Appeals (BZA) must complete the following & return to:

Ross Township Zoning Inspector  
Attn Erik Scott  
4740 Cherry Grove Rd  
Jamestown, OH 45335

Complete the application form as applicable for Conditional Use and submit **six copies** of all documents listed:

Per Sec. **1002.1** of the Zoning regulations: An application for a Conditional Use Permit by at least one owner of the property is required prior to any authorization by the Board of Zoning Appeals. At a minimum, the application shall contain the following information:

- a. Name, address, and telephone number of applicant;
- b. Date;
- c. The lot, name, and number or legal description of the property;
- d. Description of existing zoning district;
- e. Description of the proposed Conditional Use;
- f. A site plan of the proposed site for the Conditional Use showing the scale, north arrow, location of all buildings, parking and loading areas, traffic access and traffic circulation, sidewalks, curbs, open spaces, landscaping, refuse and service areas, fire hydrants, utilities, rights-of-way, signs, yards, and such other information as the Board of Zoning Appeals may require to determine if the proposed Conditional Use meets the intent and requirements of this Resolution;
- g. A plan for screening when applicable;
- h. A narrative statement discussing the merits of the proposal;
- i. Such other information as may be required by the Board of Zoning Appeals; and
- j. A fee as established by the Township Trustees.

**Before** making application see sec. **1002.2** of the Zoning regulations.

Provide a check or money order of **\$450.00** made payable to Ross Township. **This fee is non-refundable, even if the BZA does not approve the request, unless otherwise refunded by the Township Trustees.**

Upon submission of a complete application per the above instructions, you shall be notified when the BZA hearing shall occur. The hearing is held at the Township Trustee Office, located at 1772 South Charleston Rd Jamestown Ohio 45335.

An applicant may withdraw a request in writing at any time prior to BZA action thereon.

**Failure of an applicant to appear at their scheduled hearing may result in delay of decision or disapproval of their request, per the discretion of the BZA.**

**APPLICATION FOR CONDITIONAL USE APPROVAL**  
**Board of Zoning Appeals (BZA)**  
**Ross Township**  
**Greene County, Ohio**

Application No. \_\_\_\_\_

The undersigned requests conditional use approval from the BZA for the use specified below. Should this application be approved, it is understood by the applicant that approval shall only authorize issuance of a zoning permit for the use specified in this application, contingent on any safeguarding conditions which the BZA may require for approval. If the conditional use approved by the BZA would become discontinued by the applicant for a period of more than six (6) months or for a term otherwise authorized by the BZA, approval of the conditional use would expire and require reauthorization by the BZA upon resubmission by the applicant.

1. Name of Owner \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number \_\_\_\_\_

2. Location of the parcel(s) on which the conditional use is proposed, as listed by the Greene County Auditor Office Tax Map Book and other records which may be applicable as indicated below:

Tax Map Book: Number \_\_\_\_\_, Page Number \_\_\_\_\_, Parcel Number \_\_\_\_\_

(If applicable) Subdivision Plat Name \_\_\_\_\_, Section No: \_\_\_\_\_, Lot: \_\_\_\_\_

3. Location of the parcel(s) described in relation to existing public roads:

The property is located along the \_\_\_\_\_ side of \_\_\_\_\_  
(North, South, East, West) (Road Name)

being approximately \_\_\_\_\_ to the \_\_\_\_\_ of \_\_\_\_\_  
(Distance in Feet) (North, South, East, West) (Public Road or Street Name)

4. Existing Use \_\_\_\_\_

5. Zoning District \_\_\_\_\_

6. Conditional Use requested \_\_\_\_\_

THE UNDERSIGNED, IN BEING THE DULY AUTHORIZED APPLICANT OF THE PROPOSED CONDITIONAL USE, CERTIFY THAT ALL INFORMATION CONTAINED IN THIS COMPLETED APPLICATION AND ITS ATTACHED SUPPLEMENTS IS TRUE AND CORRECT, AS SUBMITTED IN REQUEST FOR BZA APPROVAL IN AUTHORIZATION TO ALLOW A ZONING PERMIT TO BE ISSUED BY THE ZONING ADMINISTRATOR.

\_\_\_\_\_  
Applicant Name: Sign and print

\_\_\_\_\_  
Date