

**APPLICATION FOR ZONING PERMIT
PIKE TOWNSHIP--BROWN COUNTY, OHIO**

The undersigned applies for a zoning permit for the following use; said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct.

1. Name of Applicant _____

Mailing Address _____

Phone Number Home _____ Business _____

2. Address of Premises _____

3. Zoning District _____

4. Existing Use _____

5. Proposed Use _____

New Construction _____ Business _____ Residence _____

Alteration _____ Industry _____ No. of Units _____

Conversion _____ Accessory Bldg. _____ Sign _____ Size x

Other (Explain) _____

(If proposed use is business or industry, attach detailed description of same)

6. Character of Construction _____

7. Supplemental requirements: This application for zoning permit shall be filed with the zoning administrator and shall be accompanied by two (2) copies of plans and specifications drawn to scale, and in ink. Said plans shall show the dimension of the lot in which a building or structure is to be located; the exact location, size and height of the building side yards, setback lines; intended use of the building or structure or part thereof; number of families or house keeping units; and other such information as may be required by the zoning administrator, and on forms provided by him. All dimensions shall be based on actual survey. The lot and the location of the building or structure shall be staked out on the ground before construction is started.

Signature _____ Date _____

*Not valid (unless completed & permit issued) after six (6) months from date requested _____

(For Official Use Only)

Date Received _____ Fee Paid \$ _____ Receipt No. _____

Date of Action on Application _____ Action _____

If denied, reason for denial _____

Zoning Administrator _____

2/11/93--Application is non-transferable.

**ZONING PERMIT
PIKE TOWNSHIP--BROWN COUNTY, OHIO**

Upon the basis of Application for Zoning Permit No. _____
filed on _____, and made part hereof by reference,
the proposed use (is, is not) found to be in conformance with the Zoning Ordinance and
this permit is hereby (approved, denied) for:

(Owner of Premises)

To: () Use the premises for _____

 () Construction of _____

Located at _____ in the
_____ District.

Date

Zoning Administrator

*One (1) copy to applicant and one (1) copy to be filed with the Zoning Administrator.
*Not valid after twelve (12) months from date issued (unless project is completed as
indicated on "Application for Zoning Permit")

APPLICATION FOR APPEAL

BOARD OF ZONING APPEALS

PIKE TOWNSHIP- BROWN COUNTY, OHIO

Application No. _____

Name of Applicant _____

Mailing Address _____

Phone Number Home _____ Business _____

Name of Property Owner(s) _____

Address of Premises _____

Auditor's Real Estate Tax Parcel Number _____

Zoning District _____

Provide names and address of all property owners within 200 feet of all property lines.

The undersigned requests review by the Board of Zoning Appeals for the following decision (interpretation) by the Zoning Administrator (of the Zoning Ordinance):

Date _____

Applicant _____

Note: This application shall be filed with the Zoning Administrator and shall be accompanied by a FEE, as established according to the Zoning Ordinance.

APPLICATION FOR ZONING CHANGE
PIKE TOWNSHIP, BROWN COUNTY, OHIO

Date Requested _____ Application # _____

The undersigned owner(s) of the following property hereby request the consideration of a change in the zoning map or text as specified below:

1. NAME OF APPLICANT _____
MAILING ADDRESS _____
PHONE # HOME _____ BUSINESS _____
2. NAME OF PROPERTY OWNERS (S) _____
ADDRESS OF PREMISES _____
AUDITOR'S REAL ESTATE TAX NUMBER _____
3. PARCEL SIZE _____
4. PRESENT ZONING DISTRICT _____
5. PRESENT USE _____
6. PROPOSED ZONING DISTRICT _____
7. PROPOSED USE _____
8. SUPPORTING INFORMATION (**THE FOLLOWING ITEMS MUST ACCOMPANY THIS FORM**):
 - a. A list of all property owners and their mailing addresses within, contiguous to, and directly across the street from the proposed zoning change;
 - b. A map or sketch of the area showing property lines and dimensions, streets, the existing and proposed zoning, and locate by name on the map the property owners listed above in a.;
 - c. A narrative stating the reasons for requesting such a change in zoning classification and any other information as needed to provide justification for the request;
 - d. The proposed amendment to the zoning map or text in ordinance form; and
 - e. Fee, as established according to Article IX, FEES.

DATE _____ APPLICANT _____

NOTE: This application shall be filed in duplicate with the Zoning Inspector.