



CITY OF OBERLIN

APPLICATION TO ZONING BOARD OF APPEALS

TYPE OF APPLICATION (Please check all that apply):

- ☐ Appeal of decision of any officer, board or bureau of the City of Oberlin (S. 1325.04)
- ☐ Variance to setback, height or area regulations (S. 1325.05 (b)(1))
- ☐ Extension of an existing building (S. 1325.05 (b)(2))
- ☐ Temporary use permit (S. 1325.05 (b)(3))
- ☐ Reconstruction of a nonconforming building damaged by natural or other causes (S. 1325.05 (b)(4))
- ☐ Variance to address a hardship or unusual or practical difficulties (S. 1325.05(b)(5))
- ☐ Extend a nonconforming use or substitute a similar use (S. 1325.05(b)(6))
- ☐ Variance to Floodplain (S. 1325.05(b)(7))

APPLICANT/AGENT INFORMATION:

Property Owner Name:_____

Property Owner Address:_____

Property Owner Telephone No.:_____

Contact Person:_____

Authorized Agent Name:_____

AuthorizedAgentAddress:_____

Authorized Agent Telephone No.:_____

Contact Person:_____

LOCATION AND DESCRIPTION OF PROPERTY:

Municipal Street Address:_____

Legal Description of Property (check property deed for description): _____

Zoning (please check one):

- | | |
|--|--|
| <input type="checkbox"/> R-1/Single-Family Dwelling District | <input type="checkbox"/> R-1A/Single-Family Dwelling District |
| <input type="checkbox"/> R-1B/Single-Family Dwelling District | <input type="checkbox"/> R-2/Dwelling District |
| <input type="checkbox"/> PD/Planned Development District | <input type="checkbox"/> P-1/Public Park and Recreation District |
| <input type="checkbox"/> C-1/Central Business District | <input type="checkbox"/> C-2/General Business District |
| <input type="checkbox"/> C-3/Planned Highway Commercial District | <input type="checkbox"/> M-1/Light Industrial District |
| <input type="checkbox"/> CDD/Conservation Development District | <input type="checkbox"/> O/Office District |

VARIANCE INFORMATION:

Date of Denial (attach copy): _____

Section(s) of Zoning Code under which a variance is requested: _____

Variance(s) Requested (Proposed vs. Required): _____

Planning Commission Decision Appeal Requested: _____

BASIS OF VARIANCE

(Describe the hardship, practical difficulty or unique circumstances resulting in the filing of the appeal):

DETAILED SITE INFORMATION:

Land Area of Property (sq. ft. or acres): _____

Total Building Coverage (of each existing building on property):

Building #1 (in sq. ft.): _____

Building #2 (in sq. ft.): _____

Building #3 (in sq. ft.): _____

Additional (in sq. ft.): _____

Total Building Coverage (as % of lot area): _____

Existing Building Height: _____

Proposed Building Height (for any new construction): _____
Proposed Building Height (for any addition): _____
Number of Dwelling Units (if applicable): _____
Number of Accessory Buildings: _____

DESCRIPTION OF PROPOSED DEVELOPMENT:

(Describe your development plans in as much detail as possible): _____

APPLICATION AUTHORIZATION:

If this application is signed by an agent, authorization in writing from the property owner of record is required. Where owner is a corporation, the signature of authorization should be by an officer of the corporation under corporate seal.

Signature of Owner or Agent _____ Date _____

PERMISSION TO ACT AS AUTHORIZED AGENT:

As owner of _____ (municipal street address of property), I hereby authorize _____ to act on my behalf during the Zoning Board of Appeals approval process.

Signature of Property Owner _____ Date _____

- NOTES:**
1. Applicants and/or their Authorized Agents ***are strongly encouraged to attend*** Zoning Board meetings.
 2. Any decision of the Board may be appealed to the Court of Common Pleas of Lorain County within thirty (30) days of the decision. Appellants proceeding with the project, if the request is granted by the Board during that period, do so at their own risk.

REQUIREMENTS FOR SUBMITTAL:

For Variance to the Requirements of the Zoning Code:

- Completed Application Form
- 10 copies of a site plan (drawn to scale and dimensioned) which shows the following items:
 - * Property boundary lines (with dimensions)
 - * Building(s) location (with setback distances to all lot lines accurately shown)
 - * Driveway and parking area locations
 - * Location of fences, walls, retaining walls
 - * Proposed development (additions, fences, buildings, etc.)
 - * Location of other pertinent items (signs, outdoor storage areas, gasoline pump islands, etc.)
- Zoning Board of Appeals Checklist (attached)
- Application fee: **\$175.00**

**CHECKLIST
ZONING BOARD OF APPEALS
REQUEST FOR PUBLIC HEARING**

- Date of denial:_____
- Date of filing this appeal:_____
(*Must not be more than ten (10) days after date of denial.*)
- Address of affected property:_____
- Nature of appeal:_____
- Was the Zoning Board of Appeals hearing procedures (Chapter 1325) provided?_____
- Was a list of names and addresses of all property owners within 200 feet of the periphery of this property submitted along with this appeal?_____
- Was a detailed plot plan, specification, and description of the proposed building, addition, or remodeling submitted?_____
- Does your letter of appeal state clearly what you are requesting and under which section of 1325.05(b) (items 1 through 7) you are asking the board to consider your appeal? _____
- Who will represent this appeal before the Zoning Board (please print name)?_____

(please check one)

- | | |
|-------------------------------------|--------------------------------|
| <input type="checkbox"/> Owner | <input type="checkbox"/> Agent |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Other |

- Submitted by:_____ Date:_____

(please check one)

- | | |
|-------------------------------------|--------------------------------|
| <input type="checkbox"/> Owner | <input type="checkbox"/> Agent |
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Other |

NOTE: Please be advised that within thirty (30) days of the Zoning Board's decision any resident may appeal such decision to the Court of Common Pleas of Lorain County. Also, should the request be granted, initiating the project before the end of that thirty (30) day period shall be the appellant's own risk.

THIS CHECKLIST MUST BE FILED WITH ANY REQUEST FOR A HEARING.