



101 E. Herman Street
Yellow Springs, OH 45387
Phone: 937-767-2460

Zoning Application: BZA CONDITIONAL USE

Application #		Fee Collected	
---------------	--	---------------	--

Property Address/Location					
Parcel Number		Zoning District		Property Acreage	

Applicant's Information

Name			
Address			
Phone		Email	
Company Name (if contractor)			

Property Owner's Information (☐ Check if same as applicant)

Name			
Address			
Phone		Email	

Which specific section of the Zoning Resolution does this requested conditional use relate to?

--

Describe the nature and intensity of the proposed conditional use operations involved in or conducted in connection with its site plan. (Use a separate sheet of paper if more room is needed)

--

Describe the proposed conditional use in relation to the road giving access to it and how vehicular traffic to and from the use will not be more hazardous than the normal traffic of the district. (Use a separate sheet of paper if more room is needed)

--



Other Information Required:

- Provide a written/typed site plan to include all property lines, buildings and details of proposed conditional use.
- Provide an Adjacent Property Owners List. This is a list of names and property addresses of all parcel owners within 300 feet of the applicant's property.
- Provide any additional information to help substantiate the issuance of the conditional use, to include applicable parking plan, ingress/egress (entering and exiting the property), and/or days/hours of operation.

The Board of Zoning Appeals shall determine:

- 1. If it has the authority to grant the request.*
- 2. That the granting of the conditional use will not adversely affect the neighborhood in which the conditional use is to be located.*

Additional factors:

- 1. An undue hardship is not required for a conditional use to be allowed.*
- 2. In granting any conditional use permit, the Board of Zoning Appeals may impose additional requirements and conditions that the Board may deem necessary for the protection of adjacent properties and the public health, safety and general welfare including specific limitations as to future expansion. Any requirement and/or conditions imposed by the Board shall not be less restrictive than those contained herein for the specific district involved.*
- 3. If a conditional use is granted to the applicant/owner, such use shall not be transferable to the succeeding property owner or occupant. In other words, the conditional use is connected to the owner and not the land itself.*
- 4. If a conditional use is approved, the plan must be followed. Any deviation requires reapplying for another conditional use permit.*

I hereby certify that all of the information supplied in this application and attachments are true and correct to the best of my knowledge, information and belief. **I hereby consent to the inspection of the subject property and of any buildings or structures to be constructed thereon by the township zoning administrator.**

Applicant's Signature:		DATE	
------------------------	--	------	--

Hearing Date	
--------------	--

This application has been ____ **APPROVED** ____ **REJECTED** for the issuance of a conditional use by the Board of Zoning Appeals.

The following conditions must be met for approval:

--

Zoning Administrator			DATE	
----------------------	--	--	------	--