

FAIRFIELD TOWNSHIP BOARD OF ZONING APPEALS

**APPLICATION UNDER THE ZONING RESOLUTION
VARIANCES, CONDITIONAL USES, OR SPECIAL EXCEPTIONS**

6032 Morris Road
Hamilton, Ohio 45011

Telephone: (513) 887-4400
Fax: (513) 887-4405

Newspaper _____
Case No. _____
Date Filed _____
Fees _____

***The Applicant must file with the Township Zoning Inspector:**

1. An understandable reason, _____

2. A clear and accurate description of proposed work or use.
3. Location of Property: Section, Town, Range, Lot Number, Township and current zoning.
4. List OWNERS name and address of ALL abutting property, including those across road or street, obtainable in Plat Room, 3rd Floor, Butler County Administrative Center, 130 High Street, Hamilton, OH.
5. Submit plans, drawn to scale, showing the exact shape and dimension of the lot, buildings and accessory buildings existing and lines within which the proposed buildings are to be erected or altered. The existing and intended use of each building or part of a building is designed to accommodate.
6. Submit Health Department approval in writing. Located at 301 South Third Street, Hamilton, OH 45011.
7. Copy of deed and subdivision restriction. Located 2nd floor, Butler County Administrative Center.
- 8. Applicant must submit six (6) complete sets of Application.**
9. Each application shall be accompanied by a fee, as specified in the Zoning Resolution for the purpose of defraying expenses. FEES \$ _____

APPLICANT: _____
PHONE: _____
ADDRESS: _____

OWNER: _____
PHONE: _____
ADDRESS: _____

Application for Conditional use, Variance or Special Exemption

Any questions on part thereof not answered in full or with complete explanation will cause this office to return all papers to applicant as misfiled and no hearing will be held.

TO THE BOARD OF ZONING APPEALS

The undersigned, hereby applies for a Fairfield Township Zoning Resolution for permission to in accordance with plans, application and all data heretofore filed with said Zoning Inspector, all of which are hereto attached and made part of this application. No previous application or appeal under the Zoning Resolution has been made by me affecting these premises.

I hereby depose and say that all the above statements and the statements contained in all the exhibits transmitted herewith are true.

Applicant or representative ***must*** be present at this meeting.

Applicants Signature

Sworn to and subscribed before me, this _____ day of _____, 20_____, by the above applicant.

Notary Public

My Commission Expires