

Application for Zoning Amendment
Hopewell Township, Seneca County, Ohio

Application number _____ Parcel number _____

The undersigned owner(s) of the following legally described property hereby request consideration of change in zoning district as specified below:

1. Name(s) of applicant _____

2. Mailing address _____

3. Phone number _____ Home Business Cell Circle one

4. Physical location of parcel requesting the change _____
(address of parcel or road that parcel is accessed from if parcel is vacant)

5. Location description: Section # _____ Township _____ Range _____

Subdivision name _____ Block _____ Lot # _____
If not located in a subdivision, attach legal description.

6. Existing use _____

7. Present existing use _____

8. Proposed use: _____
(Brief description of how this property would be used if amended)

9. Proposed zoning district _____

10. Supporting information: Attach the following item to the application

- a. A vicinity map showing property lines, streets and existing and proposed zoning.
- b. A list of all property owners within, contiguous to, and directly across the street from the proposed rezoning.
- c. A statement of how the proposed rezoning relates to the Regional Planning Comprehensive Plan.

Signature of Applicant _____ date _____

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For official use

Hopewell Township Zoning Commission or Hopewell Township Zoning Inspector

Date application was filed _____

Date of newspaper notice _____ Date of notice to other property owners _____

Signed _____

