

The Village of Hartville

202 WEST MAPLE PO BOX 760 HARTVILLE, OHIO 44632-0760 (330) 877-9222

INSTRUCTIONS FOR FILING A ZONING VARIANCE and CONDITIONAL USE REQUEST

1. Fee of \$200.00 for RESIDENTIAL and a fee of \$250.00 for COMMERCIAL Variances. Fee of \$250.00 for Conditional Use requests.

Fees must be submitted upon submittal of application. (NOTE: Only one application required per location/property.)

On Conditional Use requests, if granted the Applicant must reapply every 2 years – with a Renewal Fee of \$50.00.

2. This is a request to vary from the provision(s) of a local regulation.

Examples:

- a. Variance from all front, side and rear yard set-back lines.
- b. Variance from sign regulations.
- c. Location of all existing and proposed driveways, parking areas and walkways.
- d. Allow a B-2 "General Business" in an M-1 "Light Industrial" District (allowing one zoning district to be in another zoning district)

The Zoning Board of Appeals meets the 4^{th} Thursday of each month at 6:30 p.m. at 202 W. Maple Street, Hartville, Ohio 44632.

Deadline for applications is **20** calendar days from the meeting date.

- 3. <u>APPLICANT SHALL FURNISH THE FOLLOWING</u>: (1) PDF File emailed to: <u>office@hartvilleoh.com</u>, plus (6) stapled sets of the application to include:
 - *A numerical and graphical scaled site plan (maximum size of 17x11) of the property
 - *A typewritten letter of intent/reason for request.
- 4. Application must have attached the list of properties (which is an attached sheet) adjoining (sides and rear and across the street from) the subject property, listing ownership and lots. (SEE PAGE 3 OF APPLICATION)
- 5. The applicant or his agent **MUST** be present at the hearing in order for the application to be acted upon.

APPLICATION FOR ZONING VARIANCE

Date:			Hearing Date:		
Zonin	g Permit:				
1.	Name of Applicant: Mailing Address:				
	City:	State/Zip:	Phone	Number:	
2.	Name of Owner (if different) Mailing Address:				
	City:	State/Zip:	Phone	Number:	
3.	Address of Property Affected:				
	Lot #	Zoning District			
4.	Describe the Variance / Con	ditional Use request:			
5.	Justification of the <u>Request</u> : In order for the <u>Request</u> to receive consideration, the applicant must be prepared to convince the Board of Appeals that the following items are true.				
	B. That a literal interpre	•		ve the applicant of rights enjoyed	
	D. That the requested v	ditions are not a result	e is the minimum var	int. riance/conditional use that will	
the Vil		e this application is pe		vledge. I hereby give consent to ne subject property for purpose of	
Applic	ant:(Signature)		Owner:	(Signature)	

Please list all persons, firms or corporations owning property <u>adjoining/adjacent</u> (sides and rear and across the street) from the property in subject.

This information may be obtained from the card room of the Stark Co. Office Bldg. 330-438-0334 or visit the Stark Co. Auditor's Website – https://realestate.starkcountyohio.gov/ and go into Real Estate Search.

Lot No.	Owners Name	Address / PO Box