



Case No. _____
Date: _____

ZONING CHANGE APPLICATION

By virtue of this application, the undersigned owner(s) hereby request a change in zoning district classification to the subject property as described below.

1. Owner's Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

2. Owner's Agent: _____ Phone: _____

Address: _____ City/State/Zip: _____

3. Legal description of subject property: (City Lot #): _____

(Address): _____

4. Area to be rezoned _____ acres.

5. Existing zoning: _____ Proposed zoning: _____

6. Existing use: _____ Proposed use: _____

7. Supporting Information: The owner/agent must:

A. List all those persons (including current addresses) having an interest in the subject property whose consent is required to authorize the processing of this application.

Name (print)

Address

- B. Eight (8) copies of a plan of the proposed site to be rezoned showing the location of all buildings, parking and loading areas, traffic access and traffic circulation, open spaces, landscaping, refuse and service areas, utilities, signs, yards, schedule of development, and such other information as may be required to determine if the proposed rezoning meets the intent and requirements of this ordinance. See Chapter 1294 of the Zoning Ordinance of Miamisburg, Ohio.
- C. Attach a list of names and addresses of all property owners within 200 feet of the subject property.

The owner(s) and/or the owner's agent certify that the information contained herein, and any information provided as exhibits herewith, is correct. The owner(s) also by virtue of this request grants to those public officials/staff responsible for the review of this application, permission to inspect the subject property.

NOTE: The fee (\$ 150.00) for this application is not refundable.

Signature of Agent: _____ Date: _____

Signature of Owner: _____ Date: _____

Sworn to and subscribed before me this _____ day of _____, 20____.

Notary Public

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FOR OFFICE USE ONLY

Fee: _____

Received by: _____