



Straight Zone Change Request

Application to the Zoning Commission
Clearcreek Township, Warren County

Note: This application must be typewritten or computer generated and filed with the Clearcreek Township Zoning Inspector for presentation to the Zoning Commission. The following information must be filled out in its entirety and accompanied by a fee of \$600.00 to validate the application. The application must be received prior to the monthly scheduled cutoff date in order to be heard at the following monthly meeting. Application consents to a temporary sign being erected on the property to identify a pending zone change request. This sign shall be erected at least ten (10) days prior to the Zoning Commission's public hearing and removed after the Board of Trustees' public hearing. Attach additional computer generated or typewritten sheets as needed. Applicant is notified that the Rules and Regulations for the Zoning Commission, which outline the procedures by which the Zoning Commission shall operate, are found on the website www.clearcreektownship.com or can be requested from staff.

Name of Applicant:

Mailing address of Applicant:

Identify the Legal Description of Property to be Considered or Attach Metes and Bounds Description:

Property fronts on the following road(s):

The legal title to said property recorded in the name(s) of:

Tax mailing address of individual(s) with whom the legal title to said property is recorded:

The property is presently zoned:

Requested zoning classification:

The current use of the property:

Reason(s) for the application:

To aid the Zoning Commission processing of the request, please submit the following documentation with your application:

1. A plot plan of the subject property which includes the following:
 - A. North arrow and scale
 - B. Name of the applicant/owner
 - C. Information to locate the site: street name(s), physical address, section, town and range information, parcel number and subdivision lot number
 - D. The exact boundaries and dimension of subject property
 - E. Identification of right-of-way dimensions
 - F. Identification of all recorded easements
 - G. The dimension(s) and location(s) of all existing structure(s), including setback(s) to all property lines

Of which:

Three (3) sets of drawings shall be submitted on paper measuring 24” by 36” for Warren County Regional Planning Commission, staff review and for display during the public hearing

2. Tax Mailing Address Information shall be filled out below:

It is the responsibility of the applicant to also supply the tax mailing addresses of all owners of property located contiguous to, directly across the street from and within two hundred (200) feet of any part of the subject property being considered for a zone change request. This information is found at the Warren County Auditor’s Office, Warren County Engineer’s Map Room and at www.co.warren.oh.us/Auditor/property_search. This information can also be provided in a Microsoft Excel electronic spreadsheet.

1. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
2. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
3. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
4. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
5. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
6. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
7. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
8. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
9. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
10. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
11. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
12. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____
13. Parcel#: _____ Acres/Lot#: _____
Tax Name: _____
Address, City, State, Zip: _____

14. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
15. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
16. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
17. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
18. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
19. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____
20. Parcel#: _____ Acres/Lot#: _____
 Tax Name: _____
 Address, City, State, Zip: _____

3. If the applicant is not the property owner, an agent letter from the property owner outlining the length and terms of the agent status must be submitted with this application.

The undersigned acknowledges reading the former application. The undersigned certifies that information herein along with all submitted documents are factual and correct.

Applicant Signature

Date