



Application to the
Board of Zoning Appeals
7780 South SR 48
Hamilton Township, OH 45039

VARIANCE REQUEST

APPLICANT

Name _____

Address _____

Phone Number _____ Email _____

OWNER

Name _____

Address _____

Phone Number _____ Email _____

SUBJECT PROPERTY

Street Address _____

Parcel ID Number _____

Zoning District _____

VARIANCE REQUESTED

Code Section _____

Reason for variance _____

Applicant Signature

Date

Application Requirements

- Filing Fee
- Site plan drawn to scale
- Any other relevant plans
- Statement addressing Zoning Code Section 3.8.3
- Property Owner Affidavit for each parcel included in the request

Hamilton Township Zoning Code

3.8.3. Variance Review Criteria

- A.** *The BZA shall have the power to authorize upon appeal in specific cases, filed as hereinbefore provided, such variances from the provisions or requirements of this zoning code as will not be contrary to the public interest. Where an applicant seeks a variance, said applicant shall be required to supply evidence that demonstrates that the literal enforcement of this zoning code will result in practical difficulty for an area/dimensional variance.*
- B.** *The following factors shall be considered and weighed by the BZA to determine practical difficulty:*
- (1) Whether special conditions and circumstances exist which are peculiar to the land or structure involved and which are not applicable generally to other lands or structures in the same zoning district; examples of such special conditions or circumstances are: exceptional irregularity, narrowness, shallowness or steepness of the lot, or adjacency to nonconforming and inharmonious uses, structures or conditions;*
 - (2) Whether the property in question will yield a reasonable return or whether there can be any beneficial use of the property without the variance;*
 - (3) Whether the variance is substantial and is the minimum necessary to make possible the reasonable use of the land or structures;*
 - (4) Whether the essential character of the neighborhood would be substantially altered or whether adjoining properties would suffer substantial detriment as a result of the variance;*
 - (5) Whether the variance would adversely affect the delivery of governmental services such as water, sewer, trash pickup;*
 - (6) Whether special conditions or circumstances exist as a result of actions of the owner;*
 - (7) Whether the property owner's predicament can feasibly be obviated through some method other than a variance;*
 - (8) Whether the spirit and intent behind the zoning requirement would be observed and substantial justice done by granting a variance; and*
 - (9) Whether the granting of the variance requested will confer on the applicant any special privilege that is denied by this regulation to other lands, structures, or buildings in the same district.*
- C.** *No single factor listed above may control, and not all factors may be applicable in each case. Each case shall be determined on its own facts.*

For Township Use Only

Application file date _____

Fee _____ Check Number _____ Receipt Number _____

Date of Legal Advertisement _____

Date of Notice to Adjoining Owners _____

Date of Public Hearing _____

Action of the BZA Approved _____ Denied _____ Tabled _____

Additional Comments

PROPERTY OWNER'S AFFIDAVIT

STATE OF OHIO

COUNTY OF WARREN

I (we) _____
hereby certify that we are all of the owners of the real estate which is the subject of the pending zoning application; that we hereby consent to Hamilton Township considering the attached application and approving the request for the subject real estate. We understand that our application will be considered and processed in accordance with the regulations as set forth by the Hamilton Township Zoning Code; that we agree to accept, fulfill and abide by those regulations and all stipulations and conditions attached to the approval. I (we) authorize Hamilton Township to place a Public Meeting notification sign on the property. I (we) authorize Hamilton Township staff to enter and inspect the property. The statements and attached exhibits are in all respects true and correct to the best of my/our knowledge and belief.

Signature

Printed Name

Street Address

City, State, Zip Code

Phone

Subscribed and sworn to before me this _____ day of _____ 20____

Notary Public