



**Application to the  
ZONING COMMISSION  
7780 South SR 48  
Hamilton Township, OH 45039**

**ZONING AMENDMENT**

**APPLICANT**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

**OWNER**

Name \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Phone Number \_\_\_\_\_

Email \_\_\_\_\_

**SUBJECT PROPERTY**

Street Address \_\_\_\_\_

Parcel ID Number \_\_\_\_\_

Acreage \_\_\_\_\_

Current Zoning \_\_\_\_\_

Requested Zoning \_\_\_\_\_

**APPLICATION REQUIREMENTS**

- Filing Fee (**ALL ZONING FEES ARE NON-REFUNDABLE**)
- Property Owner's Affidavit
- Site plan drawn to scale showing subject property and all properties within 200 feet
- Any other relevant plans
- Statement explaining in detail the development plans for the property

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## 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

**For Township Use Only**

Application file date \_\_\_\_\_

Fee \_\_\_\_\_ Check Number \_\_\_\_\_ Receipt Number \_\_\_\_\_

Transmittal to WCRPC

Zoning Commission Meeting \_\_\_\_\_

Date of Legal Advertisement \_\_\_\_\_

Date of Notice to Adjoining Owners \_\_\_\_\_

Date of Public Hearing \_\_\_\_\_

Recommendation of the ZC    Approved \_\_\_\_\_    Denied \_\_\_\_\_    Tabled \_\_\_\_\_

Trustees Meeting

Date of Legal Advertisement \_\_\_\_\_

Date of Notice to Adjoining Owners \_\_\_\_\_

Date of Public Hearing \_\_\_\_\_

Action of the Board of Trustees    Approved \_\_\_\_\_    Denied \_\_\_\_\_    Tabled \_\_\_\_\_

Additional Comments