



## VARIANCE APPLICATION MONTVILLE TOWNSHIP

6665 Wadsworth Road

Medina, OH 44256

330-725-8313 ~ Fax: 330-722-6716

Date \_\_\_\_\_

Application Number \_\_\_\_\_

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE - OFFICE: \_\_\_\_\_ ALTERNATE PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

NAME OF PROPERTY OWNER: \_\_\_\_\_

LOCATION OF SUBJECT PROPERTY: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_

NATURE OF VARIANCE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ZONING CODE APPLICABLE TO THE VARIANCE REQUEST: SECTION: \_\_\_\_\_

JUSTIFICATION OF VARIANCE: PLEASE NOTE, IN ORDER FOR THE ABOVE VARIANCE TO BE GRANTED, THE APPLICANT MUST PROVE TO THE BOARD OF ZONING APPEALS THAT THE FOLLOWING ITEMS ARE TRUE. (ADDITIONAL SPACE IS PROVIDED ON THIS FORM.)

1. SPECIAL CONDITIONS THAT MAY EXIST PECULIAR TO THE LAND OR BUILDING IN QUESTION:

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2. A LITERAL INTERPRETATION OF THE RESOLUTION WOULD DEPRIVE THE APPLICANT OF RIGHTS ENJOYED BY OTHER PROPERTY OWNERS:

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3. THE SPECIAL CONDITIONS DO NOT RESULT FROM PREVIOUS ACTIONS OF THE APPLICANT:

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4. THE REQUESTED VARIANCE IS THE MINIMUM VARIANCE THAT WILL ALLOW A REASONABLE USE OF LAND AND/OR BUILDING:

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ADDITIONAL DOCUMENTS REQUIRED:

- A. PROPERTY MAP FROM MEDINA COUNTY TAX MAPS ([TAX MAPS](#)) - 9 COPIES
- B. USING THE DIMENSIONS IN THE PROPERTY MAP, PLANS MUST BE DRAWN TO SCALE, SHOWING THE DIMENSIONS AND LOCATIONS OF EXISTING BUILDINGS, DIMENSIONS AND LOCATIONS OF THE PROPOSED BUILDING OR ALTERATIONS.
- C. NATURAL OR TOPOGRAPHIC PECULIARITIES OF THE LOT IN QUESTION
- D. THE NAME AND ADDRESS OF ALL THE CONTIGUOUS PROPERTY OWNERS FROM MEDINA COUNTY TAX MAPS ([TAX MAP](#)). (INCLUDING THOSE ACROSS THE STREET FROM THE PROPERTY.) THIS INFORMATION CAN BE OBTAINED BY FOLLOWING THE HIGHLIGHTED LINK OR FROM THE PHYSICAL LOCATION OF THE MEDINA COUNTY TAX MAPS AT 144 NORTH BROADWAY STREET, ROOM 119, MEDINA, OH 44256 (330-725-9777)

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS APPLICATION AND ITS ATTACHMENTS ARE TRUE AND CORRECT.

APPLICANT SIGNATURE \_\_\_\_\_

DATE: \_\_\_\_\_

PLEASE USE THE SPACE BELOW TO LIST ADDITIONAL INFORMATION NEEDED FOR THIS VARIANCE:

[illegible]

OFFICE USE ONLY

FEE PAID: \_\_\_\_\_ DATE: \_\_\_\_\_

**PAYMENT METHOD:**