



APPLICATION NO. \_\_\_\_\_

### APPLICATION TO AMEND OR SUPPLEMENT TOWNSHIP ZONING RESOLUTION

#### TO THE TRUSTEES OF PERRYSBURG TOWNSHIP

Application is submitted herewith requesting that the **PERRYSBURG TOWNSHIP ZONING RESOLUTION**  
be:  **AMENDED**  **SUPPLEMENTED**, to:

---

---

---

Existing Zoning District: \_\_\_\_\_

Proposed Zoning District: \_\_\_\_\_

The legal description of the property is:

---

---

---

---

*(If space is insufficient, attach separate description)*

The names and mailing address of all owners of property within and contiguous to and directly across the street from the area proposed to be rezoned.

NAME OF PROPERTY OWNER(S)	TAX MAILING ADDRESS	CITY / STATE / ZIP

*(If space is insufficient, attach a separate list)*

The request is being submitted because: *(state reason and/or proposed use)*

---



---



---

*(If space is insufficient, attach separate description)*

**MAPS DEPICTING THE LOCATION OF THE PROPERTY LISTED ABOVE AS WELL AS ANY SITE PLANS, BUILDING PLANS, AND/OR RELEVANT DOCUMENTS MUST BE INCLUDED IN THIS APPLICATION.**

Applicant(s) hereby  **ALLOW**  **DENY** permission to reasonably access the property to be rezoned and/or developed by Township Officials as well as staff/members of the Wood County Planning Commission. Access shall only be used for purposes of observation of the applicant property and for the purposes of taking photographs for use in the required public hearing(s). Township and Planning Commission Officials shall only visit the site during normal business hours. If the applicant(s) choose not to allow access to the site, the zoning amendment process shall still proceed as prescribed under the Ohio Revised Code Chapter 519.

<b>APPLICANT INFORMATION</b>	
NAME(S)	
ADDRESS	CITY / STATE / ZIP
PHONE	ALT PHONE
EMAIL	
SIGNATURE	DATE
SIGNATURE	DATE
<b>PROPERTY OWNER INFORMATION</b>	
NAME(S)	
ADDRESS	CITY / STATE / ZIP
PHONE	ALT PHONE
EMAIL	
SIGNATURE	DATE
SIGNATURE	DATE

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\_\_\_\_\_  
 NOTARY PUBLIC  
 My commission expires: \_\_\_\_\_

APPLICATION NO. \_\_\_\_\_

The **WOOD COUNTY PLANNING COMMISSION** has considered the above \_\_\_\_\_  
request on \_\_\_\_\_, 20\_\_\_\_\_.

The Wood County Planning Commission recommends to:

**APPROVE**

**DENY**

**APPROVE WITH MODIFICATION**

Comments:

---

---

---

Signed:

\_\_\_\_\_  
DAVID STEINER, DIRECTOR  
WOOD COUNTY PLANNING COMMISSION

---

The **PERRYSBURG TOWNSHIP ZONING COMMISSION** considered the above request at a Public Hearing  
held on \_\_\_\_\_, 20\_\_\_\_\_.

The notice of this Public Hearing appeared in The Sentinel-Tribune on \_\_\_\_\_, 20\_\_\_\_\_.

This Perrysburg Township Zoning Commission recommends to:

**APPROVE**

**DENY**

**APPROVE WITH MODIFICATION**

Comments:

---

---

---

Signed:

\_\_\_\_\_  
CAROL WARNIMONT, SECRETARY  
PERRYSBURG TOWNSHIP ZONING COMMISSION

The **PERRYSBURG TOWNSHIP BOARD OF TRUSTEES** considered the above request at a Public Hearing held on \_\_\_\_\_, 20\_\_\_\_\_.

The notice of this Public Hearing appeared in The Sentinel-Tribune on \_\_\_\_\_, 20\_\_\_\_\_.

The recommendation of the Wood County Planning Commission and the Perrysburg Township Zoning Commission were given careful consideration at this hearing. The Perrysburg Township Board of Trustees moved to;

**ADOPT**    *the recommendation of the Perrysburg Township Zoning Commission.*

**DENY**     *the recommendation of the Perrysburg Township Zoning Commission.*

**APPROVE WITH MODIFICATION**

GARY BRITTEN \_\_\_\_\_

ROBERT MACK \_\_\_\_\_

JOSEPH SCHALLER \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed:

\_\_\_\_\_  
SHIRLEY A. HAAR, FISCAL OFFICER  
PERRYSBURG TOWNSHIP