PERKINS TOWNSHIP ZONING COMMISSION

PROCEDURES FOR ZONING CHANGE TO A PUD

NON-REFUNDABLE FEE FOR ZONING CHANGE: \$400.00

The Perkins Township Zoning Commission meets on the second Monday of each month. Applications must be complete when submitted to the Zoning Inspector.

Every application for a zoning change must be accompanied with the following information:

- 1. A vicinity map showing the property lines, streets and existing and proposed zoning. In addition, the applicant must submit a plan, **drawn to scale**, showing the actual dimensions and shape of the lot, the sizes and locations of existing buildings on the lot and the locations and dimensions of proposed buildings and parking areas.
- A list of all property owners and their mailing addresses within, contiguous to and directly across the street from the proposed rezoning. This information is available from the Tax Map office and the Erie County Treasurer at the Erie County Office Building, 247 Columbus Avenue, Sandusky, Ohio 44870.
- 3. Is there a church, school or hospital in the same street/block or within 200' of the premises in question?
- 4. Are there any restrictions on record by deed or otherwise which would prevent the proposed use of the premises? (Filed deeds can be viewed at the Erie County Recorder's Office, 247 Columbus Avenue, Sandusky, Ohio 44870.
- 5. A statement of the reason(s) for the proposed amendment.
- 6. A statement on the ways in which the proposed amendment relates to the Erie County Comprehensive Plan.

The zoning change process takes approximately 3 to 4 months. Fees may be paid by cash, check or credit card. *Transactions paid using a credit or debit card shall be subject to a non-refundable convenience fee equal to five percent (5%) of the amount of the transaction to be added to the total amount otherwise to be paid.*

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APPLICATION FOR ZONING AMENDMENT TO PUD PERKINS TOWNSHIP, SANDUSKY, OHIO

APPLIC	ATION N	10.						
The undersigned, owner(s) of the following legally described property hereby requests the consideration of change in the zoning district classification as specified below:								
Name of Property Owner:								
Name of Applicant:								
Mailing Address:								
Phone Number:								
Agent:								
Mailing Address:								
Phone Number:								
Location Description:								
Subdivision:								
Address:								
Section	:			Range:		Block N	0:	
Lot Number:			Lot Width:		Lot Depth:			
Lot Area: (if not located within a			1					,
subdivision, attach legal description)								
Existing Use:								
Present Zoning District:					Proposed Zoning District:			
Proposed Use:								
Type of Sewage disposal:					Type of water system:			
Has any previous application or appeal been filed with this Commission on these premises?								
Yes		No		If yes, when:				

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Attach the following support information to the application:								
;	A vicinity map showing property lines, streets and existing and proposed zoning. In addition, the applicant must submit a plan drawn to scale showing the actual dimensions and shape of the lot, the sizes and locations of existing buildings on the lot and the location and dimensions of proposed buildings and parking areas.							
		list of all property owners and their mailing addresses within, contiguous to and irectly across the street from the proposed rezoning.						
		there a church, school or hospital in the same street block or within 200 feet of the emises in question? Yes \(\square \) No \(\square \)						
		re there any restrictions of record by deed or otherwise which would prevent the roposed use of the premises? Yes No						
e.		A statement of the reason(s) for the proposed amendment: (Use separate paper if necessary)						
f.	A statement on the ways in which the proposed amendment relates to the Erie County Comprehensive Plan: (Use separate paper if necessary)							
Applicar Signatur			Date:					
For Official Use Only Perkins Township Zoning Commission								
Zoning Signatur	re:	January Lands	Date Filed:					

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