

ATTENTION: ALL BOARD OF ZONING APPEALS APPLICANTS

PLEASE READ THE APPLICATION CAREFULLY AND FOLLOW THE INSTRUCTIONS PROVIDED.

IF YOU ARE REQUESTING A VARIANCE, READ CAREFULLY THE STANDARDS USED IN GRANTING AN AREA VARIANCE AND A USE VARIANCE. THESE ARE THE STANDARDS THAT THE BOARD OF ZONING APPEALS WILL USE IN EITHER GRANTING OR DENYING YOUR REQUEST. PLEASE BE PREPARED TO DISCUSS THESE STANDARDS AT YOUR HEARING.

BE ADVISED THAT COMPLETING THIS APPLICATION AND PAYING THE REQUIRED FEE **DOES NOT GUARANTEE** THAT YOUR REQUEST WILL BE GRANTED.

PLEASE FULLY STATE TO THE ZONING DEPARTMENT WHAT YOU ARE REQUESTING SO WE CAN HELP YOU IN OBTAINING RELEVANT PORTIONS OF THE ZONING RESOLUTION. HOWEVER, **IT IS RECOMMENDED THAT YOU PURCHASE A COPY OF THE ZONING RESOLUTION** SO THAT YOU WILL HAVE ALL ARTICLES AND SECTIONS AVAILABLE TO YOU AS YOU COMPLETE THIS APPLICATION. IT IS **YOUR RESPONSIBILITY** TO MAKE SURE THAT YOU HAVE COMPLIED WITH ALL APPLICABLE SECTIONS OF THE ZONING RESOLUTION.

PLEASE DO NOT ASK THE ZONING DEPARTMENT TO ESTIMATE YOUR CHANCES OF SUCCESS IN THIS APPEAL. THE DECISION TO GRANT OR DENY YOUR REQUEST IS **SOLELY** THE RESPONSIBILITY OF THE BOARD OF ZONING APPEALS.

THE ZONING DEPARTMENT WILL ATTEMPT TO ANSWER ANY QUESTIONS YOU MAY HAVE REGARDING THIS APPLICATION AND THE APPEAL PROCESS. HOWEVER, THE ZONING DEPARTMENT CANNOT AND WILL NOT GIVE YOU LEGAL ADVICE NOR WILL WE GIVE YOU PERMISSION TO DESREGARD THE INSTRUCTIONS IN THIS APPLICATION.

APPLICATIONS **MUST BE COMPLETE** IN ORDER TO BE SUBMITTED TO THE BOARD OF ZONING APPEALS.

Lake Township



Board of Zoning Appeals Application

APPEAL NO. _____ DATE FILED: _____

DATE OF ZONING ADMINISTRATOR'S DECISION: _____

PROPERTY OWNER (S):

APPLICANT (S):

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

CITY, STATE, ZIP _____

CITY, STATE, ZIP _____

PHONE: _____

PHONE: _____

PREMISES AFFECTED: _____

QTR. SEC. NO. _____ **ZONED:** _____ **LAKE TOWNSHIP**

I HEREBY APPEAL TO THE BOARD OF ZONING APPEALS OF LAKE TOWNSHIP FOR THE FOLLOWING: (CIRCLE OR HIGHLIGHT ONE OF THE FOLLOWING:)

CONDITIONAL USE PERMIT

VARIANCE
OTHER

HOME OCCUPATION TYPE B

Article Number _____ **Section Number** _____

FOR THE FOLLOWING REASONS: _____

**ADJOINING PROPERTY OWNERS
NAME AND ADDRESS**

ACROSS THE STREET _____

ADJOINING LEFT SIDE _____

ADJOINING RIGHT SIDE _____

ADJOINING REAR _____

***PLEASE ATTACH A DETAILED SITE PLAN SHOWING EXISTING BUILDINGS AND PROPOSED CONSTRUCTION OR USE FOR WHICH THIS APPLICATION IS MADE. FILL IN ALL DIMENSIONS AND INDICATE WHICH DIRECTION IS NORTH!**

- ❖ An appeal to the Board of Zoning Appeals must be filed within twenty (20) days of the decision of the Zoning Administrator and must specify the grounds for appeal.
- ❖ The Board of Zoning Appeals shall review the proposed development, as presented on the submitted plans and specifications in terms of the standards established in this resolution. Such review by the Board of Zoning Appeals shall be completed and made public within forty-five (45) days of the date of submission.
- ❖ By filing this application, the applicant consents to:
 - 1) A sign being placed on his/her property, and...
 - 2) Allowing Board of Zoning Appeals members and/or Zoning Department staff to enter applicant's property for inspection.

Filing Fees: Variance request, conditional use, home occupation, and other request \$275.00.

*Applicant will be responsible for additional cost incurred in the event of re-advertisement and re-notification or special studies deemed necessary by the Board of Zoning Appeals.

Applicant

Date

QUESTIONS TO ASK REGARDING VARIANCE REQUEST

Is it substantial?
Is the lot conforming?
Is the structure on the lot conforming to regulations?
Is there a practical difficulty?
Is there a hardship not of their own making?
Will it change the character of the neighborhood?
If it's a business... is there sufficient off street parking?

QUESTIONS TO ASK REGARDING A HOME OCCUPATION TYPE B

Is the business, which falls into categories of Article IV, 405 (F). Article VII, Table 703; Sec. 707. Article IX, 903, 904(A). Article VI, Sec. 603, 604, 606.
How many employees?
Where is the business in the home? What percent (%) of the home will be used?
Will there be a sign?
Is there adequate off street parking?
Traffic... will there be a significant increase?
Will there be deliveries?
What are the hours of the business?
Does the lot conform to regulations?

QUESTIONS TO ASK REGARDING A CONDITIONAL USE

What is the type of business... is it conditionally permitted in the resolution?
Is there sufficient parking- how many spaces-
What are the landscaping proposals?
Will there be a sign?
What kind of lighting... will it comply with the regulations?
Number of employees?
Is the lot of conforming size... do the structures meet the setback regulations?

LAKE TOWNSHIP SITE PLAN REVIEW APPLICATION

PROJECT: _____

ZONING AND SITE PLAN REVIEW PROCEDURES:

1. THE ZONING APPLICATION SHALL BE SUBMITTED ALONG WITH:

1. **A PROPOSED SITE PLAN:**
2. **THE SITE PLAN REVIEW CHECKLIST:**
3. **REQUIRED FEES.**

2. **SITE PLAN(S) SHALL BE PREPARED BY A REGISTERED ARCHITECT, LANDSCAPE ARCHITECT, ENGINEER OR SURVEYOR, ALL LICENSED, REGISTERED, AND WITH SEALS FOR ALL ZONING APPLICATIONS EXCEPT SINGLE AND TWO FAMILY RESIDENTIAL (NOTE: ONE & TWO FAMILY RESIDENTIAL SITE PLANS MAY BE PREPARED BY THE OWNER OR THEIR ASSIGNED REPRESENTATIVE).**

3. APPLICATIONS WILL BE REVIEWED BY LAKE TOWNSHIP TO INSURE THAT THE APPLICATION IS COMPLETE AND THE FEE HAS BEEN SUBMITTED. THE PLAN PREPARER WILL BE NOTIFIED OF ANY MISSING FORMS.

4. APPLICANT WILL THEN PROVIDE **SIX (6)** SETS OF PLANS (ONE SET SEALED) OF THE MODIFIED SITE PLAN. **IF PLANS ARE LARGER THAN 11 X 17 PLEASE SUBMIT ONE ADDITIONAL SET OF PLANS SIZE 11 X 17 OR SMALLER.**

5. **THE COSTS OF ANY SPECIAL STUDIES TO BE MADE** (i.e. ENGINEER, ATTORNEY . . .) OR IF A STRICT RECORD OF THE PUBLIC HEARING ON THE APPLICATION IS NECESSARY, SUCH DIRECT AND RELATED **COSTS SHALL BE PAID BY APPLICANT.**

6. IF SITE PLAN(S) ARE APPROVED BY LAKE TOWNSHIP A ZONING PERMIT WILL BE ISSUED.

7. **PLEASE BE PREPARED TO DISCUSS IN DETAIL THIS SITE PLAN REVIEW AND THE BOARD OF ZONING APPEALS APPLICATION AT YOUR HEARING.**

PROPERTY OWNED BY:

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

PLAN(S) PREPARED BY:

COMPANY: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

PHONE: _____ FAX: _____

APPLICANT SAME AS PROPERTY OWNER? _____ YES _____ NO

If "NO", provide name, address, and phone of applicant:

SITE CHARACTERISTICS:

GENERAL SITE LOCATION: _____

PROPERTY ADDRESS: _____

CURRENT ZONING DISTRICT: _____

PROPOSED USE OF PROPERTY: _____

SITE SIZE (dimensions and acreage): _____

PROPOSED BUILDING(s) / ADDITION (s) SQUARE FOOTAGE: _____

NUMBER OF DWELLING UNITS: _____

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ESTIMATED CONSTRUCTION COST (include parking + utilities): _____

1. Appropriate noted scale. Street address and parcel number. _____
2. Submission date, north arrow, street names (existing and proposed right of way). _____
3. Name of person preparing plan with seal. _____
4. Proposed site / vicinity location map. _____
5. Property line and street right of way with dimensions. Indicate Edge of pavement. _____
6. Zoning setback lines, distance between buildings (nearest point to nearest point). _____
7. Location of new buildings/ additions, razed structures or accessory buildings. _____
8. All existing structures (labeled for use and zoning within 100 feet of perimeter property lines). _____
9. Access drives, internal roads (note public or private; identify right of ways), service roads _____
10. Parking areas (numbered spaces, dimensioned typical parking space, maneuvering lanes).
Handicap parking location and number. Indicate striping/ marking and wheel stops. _____
11. Table of parking spaces required by zoning vs. parking spaces provided. _____
12. Multiple housing units: number of units, composition (efficiency, one bedroom, two, and three). _____
13. Existing easements (utility, access) within site limits. If none, state this on the plan. _____
14. Loading / unloading, service areas. _____
15. Sidewalks (internal and public within road right of way). _____
16. Site grading and drainage plan (on-site elevations, current and proposed, for pavements, drives, roads, parking lots, curbs, sidewalks and finished grades at building facades). _____
17. Existing natural features (trees, lakes, ponds, streams, rock outcroppings, severe topography, wetlands, etc.) _____
18. An engineered and sealed drainage plan (one copy) shall accompany all site plans. _____
19. Proposed retention/ sedimentation ponds. _____
20. Snow storage/ snow management plan. _____
21. Dumpster location and screening indication. _____

22. Proposed landscaping / buffer areas (require green belts, plant materials/ size and type, fences, retaining walls, earthberms, etc.) _____

23. Location of outdoor lights, poles bollards, building attached, luminary shielding techniques, height of fixture (provide cut-sheets). _____

24. Fire hydrants. _____

25. Acceleration/ deceleration lanes. _____

26. Site amenities (play areas, pools, beaches, tennis courts, etc.) _____

27. Types of surfacing (paving, gravel, turfing, or grated) to be used. _____

28. Standard ODOT cross sections for pavement, curbing, catch basins, drive entrances, or other standard facilities. _____

29. Proposed building elevations (to scale, identifying maximum building height, average curb elevation, finish floor elevation, highest point of building.) _____

30. General floor plan indicating internal function. The proposed use(s) must be indicated in as much detail as possible. It is not sufficient to merely indicate the use as office or warehouse; the type of office enterprise or the type of materials to be warehoused must be identified. _____

31. Numbered hotel rooms/ residential units on floor plan. _____

32. The following notes shall be shown on the plan:

A. A final zoning and site improvement inspections shall be required to verify site plan compliance. This

inspection is to occur BEFORE a Certificate of Occupancy can be issued.

B. Deteriorated or dead screening shall be required or replaced within six months.

C. No permanent construction can occur within the buffer areas.

D. Storm water retention/ detention facilities, storage tanks for any purpose, utility substances and buildings

housing utility substations, commodities or equipment are also prohibited in required buffer yards. _____

33. Identify signs: indicate number, type, size, and locations. _____

34. Indicate number of employees and hours of operations including days of the week. _____

35. Indicate stacking requirements (with dimensions) for drive- thru lanes and gas stations. Include a bypass lane for all drive- thru windows. _____

36. Indicate graphically where the exterior display of merchandise/ product or items for sale are to be displayed. Indicate quantity, type and size of items for display/ sale. _____

Applicant's Signature: _____ **Date:** _____

Project: _____

Date fee paid: _____ Receipt No. _____

Date of notice mailed to parties in interest: _____

Date packets mailed to B.Z.A. members: _____

Date and time of public hearing: Date _____ Time: 7:00 p.m. _____

Decision of the Board of Zoning Appeals: _____

Date of Decision: _____

Chairman, Board of Zoning Appeals

FOR OFFICE USE

To: Road Department
From: Zoning Department-Cindy
RE: Zoning Sign
Date: _____

Board of Zoning Appeals - **SMALL SIGN**

ZONING NOTICE

AN APPLICATION HAS BEEN FILED WITH THE BOARD OF ZONING APPEALS
THAT COULD AFFECT THE USE OF THE PROPERTY. FOR FURTHER
INFORMATION CONTACT THE LAKE TOWNSHIP ZONING DEPARTMENT.

SIGN TO BE POSTED AT:

ADDRESS

PLEASE POST NO LATER THAN:

DATE

DATE SIGN POSTED: _____ BY: _____

DATE SIGN REMOVED: _____ BY: _____

* UPON COMPLETION OF POSTING OR REMOVING (WHICHEVER THE CASE
MAY BE) PLEASE RETURN COMPLETED FORM TO THE ZONING OFFICE. *

FOR OFFICE USE