

JEFFERSON TOWNSHIP, CRAWFORD COUNTY, OHIO

APPLICATION FOR AMENDMENT TO THE JEFFERSON TOWNSHIP ZONING RESOLUTION

ALL APPLICATIONS MUST BE SIGNED BY AN OWNER OR LESSEE.

NAME OF APPLICANT _____

ADDRESS _____

PHONE NUMBER _____

LOCATION OF PROPERTY TO BE REZONED _____

CURRENT DISTRICT _____

PROPOSED DISTRICT _____

IF THE AMENDMENT SOUGHT INVOLVES A CHANGE IN THE TEXT RATHER THAN THE USE DISTRICT, ATTACH PROPOSED LANGUAGE AND SPECIFY SECTION TO BE AMENDED.

ATTACH A SITE PLAN SHOWING BOUNDARIES OF PROPERTY, ABUTTING STREETS AND ROADS.

ATTACH A LIST OF THE NAME AND ADDRESS OF ALL PROPERTY OWNERS WITHIN, CONTIGUOUS TO AND DIRECTLY ACROSS THE STREET FROM THE PROPERTY TO BE REZONED.

Date

Applicant Signature