

Etna Township, Ohio

Township Hall: 81 Liberty Street; P.O. Box 188; Etna, OH 43018-0188

Phone: 740-927-7717 Fax 740-927-1699

Variance #: VA-_____

Area Variance Application

(Refer to Articles 5 or 13)

The undersigned owner(s) of the following property hereby request a variance from the mentioned section(s) of the Etna Township Zoning Resolution.

1. Applicant
2. Applicant's relationship to owner _____
3. Applicant's address _____
4. Applicant's Phone: Daytime _____ Other _____
5. Owner(s) _____
6. Owner's address _____
7. Owner's Phone: Daytime _____ Other _____
8. Property address (attach legal description) _____
9. Zoning District of property _____
10. Variance is from Section _____ Title _____
11. Nature of variance (attach if necessary): _____

12. Narrative statements a thru g: Attach sheet of narration.
 - a. Whether the property in question will yield a responsible return or whether there can be any beneficial use of the properties without a variance.
 - b. Whether a variance is substantial.
 - c. Whether the essential character of the neighborhood would be substantially altered or whether adjoining properties would suffer a substantial detriment as a result of the variance.
 - d. Whether the variance would adversely affect the delivery of governmental services, (e.g. water, sewer, garbage).
 - e. Whether the property owner purchased the property with knowledge of the zoning restrictions (prior knowledge does not destroy opportunity for area variance request)
 - f. Whether the property owner's predicament feasibly can be obviated through some method other than a variance and
 - g. Whether the spirit and intent behind the zoning requirement would be observed and substantial justice done by granting the variance.

13. Attach mailing addresses of all owners of all properties adjacent to the property in question and any other affected property owner.

I certify that the information contained in this application and its supplement is true and correct.

Signature of Applicant _____ Date _____

Signature of Owner(s) _____ Date _____

Township Use Only

Received by _____ Date _____

Fee received by Zoning Administrator _____ Date _____

Proposed Board of Zoning Appeals Date _____