

FEE: \$450.00 + certificate of mailing + recording fees

**PLAIN TOWNSHIP ZONING COMMISSION
INSTRUCTIONS FOR FILING APPLICATION OF ZONING AMENDMENT**

In order to process your application as soon as possible after filing, the following requirements are detailed for your convenience:

- A. **This application must be submitted by the first (1st) business day of the month.**
- B. **You must submit nine (9) copies and one (1) original of the entire application, including any drawings, maps and the notary page.**
- C. Description, location, use of land and reason for requesting the zoning amendment must be clearly described in detail and in a legible manner on the application. (see page 3)
- D. The questionnaire page must be completed. (see page 4)
- E. **Ten (10) copies of the map of the area involved must be submitted with the application.** The parcel affected must be marked on the tax map with diagonal lines. (Maps and names may be obtained at the Stark County Auditor's Map Office located in the Stark County Office Building, 110 Central Plaza South, Suite 210, Canton, Ohio 44702). The owners name and tax mailing addresses of adjacent properties, including across the street must be listed on the application in the space provided. **Both** addresses **must** be included. (see page 5)
- F. Application must be **filled out completely**, typed or **legibly handwritten** and **notarized**. If the person filing the application is not the owner of the property, an affidavit of ownership must be signed and notarized along with a written letter from the owner giving the applicant permission to apply for the Zone Change. (see page 6)
- G. If the applicant is a business and not an individual, please attach a letter on the business' letterhead stating the applicant's full business name, identifying the person signing for the applicant by name and title, and stating that said person is authorized to sign for the applicant.

If the owner is a business and not an individual, please attach a letter on the business' letterhead stating the owner's full business name, identifying the person signing for the owner by name and title, and stating that said person is authorized to sign for the owner.
- H. A **\$450.00 filing fee plus certificate of mailing fees** shall accompany this application. Checks are to be made payable to the Plain Township Board of Trustees. Upon zone change approval a check shall be made to the Stark County Recorder for recording fees.
- I. After filing the application, you will be notified by certified mail of the date, time and place of the hearing. **Your presence at the hearing is mandatory.**

**APPLICATION FOR
ZONING AMENDMENT**

Application No. _____

Filed _____

ZONING COMMISSION
PLAIN TOWNSHIP
2600 EASTON STREET NE
CANTON, OHIO 44721
330-492-4686

The undersigned requests a Zoning Amendment to the Plain Township Zoning Resolution. If the amendment is approved it will become effective 30 days after the Plain Township Trustees decision.

Applicant _____ Phone _____

Mailing Address _____

Owner of premises affected _____ Phone _____

Mailing Address of Owner _____

Lessee of premises affected _____ Phone _____

Mailing Address of Lessee _____

Address of Property Affected _____

Subdivision Name _____ Lot No. _____
(If not in a platted subdivision, attach a legal description)

Zoning District _____ Map Section _____

From: _____
(Existing Zoning District)

To: _____
(Zoning District Requested)

NOTE: An accurate legal description of the property proposed for rezoning must also be submitted with this application.

QUESTIONNAIRE PAGE

1. Has any previous Amendment been filed with the Board on these premises?

Yes _____ No _____

If yes, when? _____

2. How long has present owner held title to the property? _____

3. Is there a school, church or hospital in the same street-block or within 200 feet of the premises in question? Yes _____ No _____

4. Has court summons been served relative to this matter? Yes _____ No _____

5. Is there any case pending in court involving the use of the premises or the ownership thereof?

Yes _____ No _____ If yes, explain _____

6. Are there any restrictions of record by deed or otherwise which would prevent the proposed use of the premises?

Yes _____ No _____

If so, what are they? _____

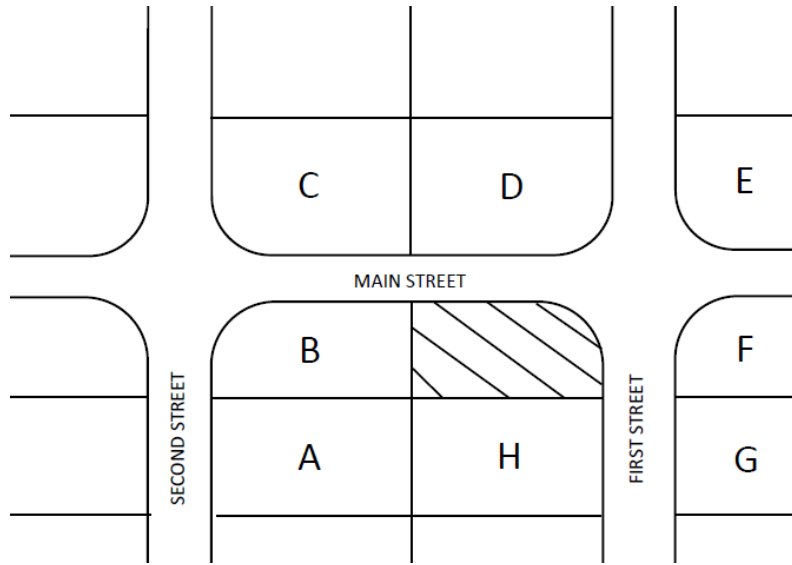
7. Are you to be represented by an attorney in this matter? Yes _____ No _____

If yes, give name and address. _____

8. What is the approximate cost of the work involved by this application? _____

ADJACENT PROPERTY OWNER PAGE

Example:



Note: This sketch may not reflect the exact configuration of your property or adjacent properties. It is intended to serve only as a guide to help determine which properties may be adjacent to yours for notification purposes. Do not use this sketch for your map that is required as a part of this application.

Please list all the individuals, firms or corporations owning property adjacent to both sides and rear, and the property in front of (across the street from) the premises which are the subject of this amendment. Add additional sheet if necessary.

Name	Address and Tax Mailing Address if different
A. _____	_____
B. _____	_____
C. _____	_____
D. _____	_____
E. _____	_____
F. _____	_____
G. _____	_____
H. _____	_____
I. _____	_____
J. _____	_____
K. _____	_____
L. _____	_____
M. _____	_____

NOTARY PAGE

I hereby depose and say that all of the statements contained in the papers submitted herewith are true.

Applicant's Printed Name - Title

Applicant's Signature

Sworn to before me this _____ day of _____ 20_____, by me said Applicant _____.

Notary Public

**AFFIDAVIT OF OWNERSHIP
(To be complete if applicant is not owner)**

_____ being duly sworn, deposes and says he/she resides at
(Owner's Name)

_____ in the County of _____, in the State
(address)

of _____, that he/she is the owner of the affected property located in the Township of Plain, Stark County, Ohio and known as _____ and that
(address or parcel)

he/she hereby authorizes _____ to make the annexed application in his/her
(Applicant's Name)

behalf and that the statements of fact contained in said application are true.

Owner's Printed Name - Title

Owner's Signature

Sworn to before me this _____ day of _____ 20_____, by me said Owner _____.

Notary Public