



1454 Rome Corners Road  
Galena, Ohio 43021  
740-965-2992  
[www.berkshiretwp.org](http://www.berkshiretwp.org)

Application # \_\_\_\_\_

Date received \_\_\_\_\_

Township Fee \$ \_\_\_\_\_

Make Check Payable to Berkshire Township

DCRP Fee \$250.00 \_\_\_\_\_

Make check payable to Delaware County Regional Planning

## Application to Amend Berkshire Township Zoning Resolution District from A-1 to FR-1 (Article 8)

Name of applicant \_\_\_\_\_ Contact \_\_\_\_\_

Address of applicant \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Name of Property owner \_\_\_\_\_

Address of property owner \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Location/address of property to be rezoned \_\_\_\_\_

Parcel number(s) \_\_\_\_\_

Current zoning \_\_\_\_\_ Current use \_\_\_\_\_ Total acres \_\_\_\_\_

Proposed zoning district \_\_\_\_\_ Proposed use \_\_\_\_\_ Acres to rezone \_\_\_\_\_

### INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

#### Submittal Requirements. The following must be submitted with the correct application fee:

1. Applicant shall include a complete legal description and survey of the property.
2. A list of the names and addresses of all property owners, as appearing on the County Auditor's current tax list, who are within, contiguous to, directly across the street from, and within 200 feet of the perimeter boundaries of the area proposed to be rezoned.
3. The proposed size and location of the district, at a scale of 1" = 200', existing and proposed structures, and structures within 200' of the development tract.
4. Details of the lot to be rezoned as indicated in Article 8, Section 8.05, A, B and C.
5. Any other supporting documentation in regard to this application.

**Applicant is required at time of application to supply ten (10) completed application forms** signed by the applicant and property owner(s) or a power of attorney **and ten (10) copies of all documentation submitted with application.**

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

Applicant and property owner(s) certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the requested zoning change. Applicant agrees to be bound by the provisions of the zoning resolution of Berkshire Township, Delaware County, Ohio.

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Property owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** The initial application fee covers **TWO** Zoning commission hearings. If additional hearings are requested by the applicant, additional fees will be charged in accordance with the adopted fee schedule and are payable before the next hearing will be scheduled.

Received by: \_\_\_\_\_ Date: \_\_\_\_\_