



1454 Rome Corners Road
Galena, Ohio 43021
740-965-2992
www.berkshiretpw.org

Application # _____
Date received _____
Township Fee \$ _____
Make Check Payable to Berkshire Township
DCRP Fee \$300.00 _____
Make Check payable to Delaware County Regional Planning

Application for Planned Commercial and Office District (PCD Article 15)

Name of applicant _____

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 _____

NCAIS Code No. _____ Proposed Use _____ Acres to rezone _____

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

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 Planned district, at a scale of 1" = 200', showing topographic contours of at least 5' intervals, existing and proposed structures, and structures within 200' of the development tract.
4. **If Rezone only with a Preliminary Development Plan:** Details associated with Article 15 Section 15.05, 15.09 (A), preliminary discussion/documents relating to Article 21, Article 22 and Article 23.
5. **If Rezone with a Final Development Plan:** Detailed development plans as stated in the Berkshire Township Zoning Resolution, Article 15 Section 15.05 and 15.09 (C), Article 21, Article 22, and Article 23.

6. Any other supporting documentation.

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: _____

For Zoning Commission Only:

Section 15.06 REQUIRED FINDINGS FOR PCD APPROVAL

The Zoning Commission and Trustees may approve an application requesting that property be included in the PCD zoning district, provided they find that the proposed use complies with all of the following requirements:

- 1.) That the proposed development is consistent in all aspects with the purpose, criteria, intent, and standards of this Zoning Resolution.
- 2.) That the proposed development is in conformity with the comprehensive plan or portion thereof as it may apply.
- 3.) That the proposed development promotes the health, safety, and general public welfare of the township and the immediate vicinity.
- 4.) That the proposed plan meets all of the design features required in this Resolution.
- 5.) That the proposed development is in keeping with the existing land use character and physical development potential of the area.
- 6.) That the proposed development will be compatible in appearance with surrounding land uses.
- 7.) That the development promotes greater efficiency in providing public utility services and encouraging innovation in the planning and building of all types of development.