

THE VILLAGE OF SOUTH VIENNA, OHIO
149 West Main Street
South Vienna,
Ohio 45369
(937) 568-4311

APPLICATION FOR ZONING VARIANCE

The applicant or your representative must attend the Variance Hearing as scheduled, or your request **WILL NOT** be reviewed by the Board of Zoning Appeals. You may add additional pages, but the question being answered must be identified on each page.

Non-Refundable Variance Application Fee: Any Residential Zoning Districts Variance Application fee is \$50.00. All other Zoning Districts Variance Application fee is \$150.00. Make a check payable to the Village of South Vienna, Ohio.

OWNER _____ **PHONE (____)** _____
EMAIL _____ **ADDRESS** _____

CITY/STATE _____ **ZIP** _____

APPLICANT _____ **PHONE (____)** _____
EMAIL _____ **ADDRESS** _____

CITY/STATE _____ **ZIP** _____

PARCEL # _____

ZONING DISTRICT:

- Residential- Low Density Residential -Medium Density Residential - Village Center
 Park Industrial Agricultural Small Business District Commercial School

VARIANCE(S) REQUESTED:

Description of Variance Requested (Be specific): _____

QUESTIONNAIRE:

NOTE: To receive a variance, you must meet all the variance requirements in Section VI of the Zoning Code for the Village of South Vienna, Ohio. Your answers to the following questions will help the Board of Zoning Appeals determine whether you meet the requirements for a variance. If you do not answer all questions, we will consider your application incomplete.

1. Are there special conditions or circumstances applying to the property involved that do not generally apply to other properties in the same zoning district?

2. Do the special conditions and circumstances, listed under question #1, result from any actions of the applicant?

3. Can there be any beneficial use of the property without the variance? If not, explain:

4. Will the variance adversely affect the delivery of governmental services? (e.g., water, sewer, garbage, fire, police?)

5. Did the applicant purchase the property with knowledge of the zoning restrictions?

6. Has the applicant considered some method other than a variance to resolve their issue or concern?

I hereby certify that the facts, statements, and information presented within this application form are true and correct to the best of my knowledge and belief. I hereby understand and certify that any misrepresentation or omissions of any information required in this application form may result in my application being delayed or not approved by the Village. I hereby certify that I have read and fully understand all the information required in this application form and all applicable requirements of the Zoning Code for The Village of South Vienna, Ohio. I further acknowledge that if work on an approved Variance has not been completed within one (1) year of its date of issuance, meaning there has not been active and substantial improvement to a property in accordance with a valid Variance, then the Variance shall expire, and no work may commence or continue without either renewing the Variance or receiving a new Variance approval from the Zoning Inspector or the Board of Zoning Appeals in accordance with the Zoning Code for The Village of South Vienna, Ohio.

SIGNATURE OF APPLICANT/AGENT

DATE

REVIEWED BY: _____

APPROVED/DENIED: _____ APPROVED/DENIED DATE: _____

NONREFUNDABLE FEE: \$ _____ PAID