

APPLICATION FOR ZONING TEXT AMENDMENT

Mad River Township  
Champaign County, Ohio

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

**The undersigned, an owner(s) or lessee(s) of property(ies) proposed to be affected by this proposal, hereby request the consideration of change in the Zoning Resolution text.**

1. Name of Applicant(s) \_\_\_\_\_

Mailing address \_\_\_\_\_

Telephone \_\_\_\_\_

2. Locational description of property owned or leased:

Section \_\_\_\_ Range \_\_\_\_ Township \_\_\_\_\_ Lot # \_\_\_\_

(If not located in a platted subdivision or community attach a legal description)

3. Current section(s) of Zoning Resolution to be modified, as currently written. Attach a separate sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_

4. Proposed zoning text. Attach a separate sheet if necessary.

\_\_\_\_\_  
\_\_\_\_\_

5. Supporting information: Attach the following items to the application.

(a) A vicinity map showing property lines, streets (roads) and existing zoning of the area to be affected by the proposed change.

(b) A list of all property owners within, contiguous to and directly across the street (road) from the proposed rezoning area *if ten or fewer parcels are involved in this request.*

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Signature

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For Official Use Only  
Zoning Commission

Date Filed \_\_\_\_\_  
Date of Public hearing \_\_\_\_\_  
Date of notice in newspaper \_\_\_\_\_  
Date of notice to adjacent property owners \_\_\_\_\_  
Fee Paid \_\_\_\_\_  
Recommendation of Zoning Commission: Approval \_\_\_\_\_ Denial \_\_\_\_\_  
If denied, state reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_  
Zoning Commission Chairman \_\_\_\_\_  
Zoning Commission \_\_\_\_\_  
Zoning Commission \_\_\_\_\_

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Township Trustees

Date of recommendation received from Zoning Commission \_\_\_\_\_  
Date of Public Hearing \_\_\_\_\_  
Date of notice in newspaper \_\_\_\_\_  
Action by township trustees: Approval \_\_\_\_\_ Denial \_\_\_\_\_  
If denied, state reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date \_\_\_\_\_  
Fiscal Officer, \_\_\_\_\_  
Township Trustees \_\_\_\_\_  
Township Trustees \_\_\_\_\_