



NON CONFORMING USE # _____

ZP # _____

CITY OF CIRCLEVILLE APPLICATION FOR CHANGE, EXTENSION, OR EXPANSION OF NON CONFORMING USE

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

APPLICANT'S PHONE: _____ E-MAIL: _____

PROPERTY OWNER'S NAME: _____ PHONE #: _____

PROPERTY ADDRESS: _____

ZONING DISTRICT: _____ PROPOSED USE OF PROPERTY: _____

THE PROPERTY OWNER/APPLICANT MUST SUPPLY A LEGAL DESCRIPTION OF THE PROPERTY, AS RECORDED IN THE PICKAWAY COUNTY RECORDER'S OFFICE. LEGAL DESCRIPTION ATTACHED: YES _____ NO _____

A SCALE PLOT MUST BE PROVIDED. PLOT PLAN ATTACHED: YES _____ NO _____

CURRENT NON CONFORMING USE: _____

PROPOSED NON CONFORMING USE OR PLAN OF EXTENSION OR EXPANSION: _____

THE NAMES AND MAILING ADDRESSES OF ALL PROPERTY OWNERS WITHIN 100 FEET, CONTIGUOUS TO, AND DIRECTLY ACROSS THE STREET FROM THE PROPERTY, AS APPEARING ON THE PICKAWAY COUNTY AUDITOR'S CURRENT TAX LIST, IN THE PICKAWAY COUNTY COURTHOUSE, MUST BE PROVIDED.

LIST OF ADJACENT PROPERTY OWNERS (WITHIN 100 FEET) ATTACHED: YES _____ NO _____

DATE: _____ APPLICANT'S SIGNATURE: _____

DO NOT WRITE BELOW THIS LINE

APPLICATION RECEIVED BY: _____ DATE: _____

FEE PAID \$ _____ CASH: _____ CHECK #: _____

ACTION BY ZONING COMMISSION: ON THE _____ DAY OF _____, 20_____.

THE PLANNING AND ZONING COMMISSION (APPROVED) (DENIED) THE REQUEST FOR CHANGE, EXPANSION OR EXTENSION OF AN EXISTING NON CONFORMING USE WITH THE FOLLOWING CONDITIONS:

FOR THE FOLLOWING REASONS: _____

IF THE ZONING COMMISSION APPROVES THE ABOVE REQUEST FOR A CHANGE, EXPANSION OR EXTENSION OF A NON CONFORMING USE, THE ZONING INSPECTOR IS NOW AUTHORIZED TO ISSUE ANY NECESSARY PERMITS: THE FOLLOWING PERMITS WILL BE NECESSARY: ZONING PERMIT VARIANCE OTHER (EXPLAIN OTHER) _____ NONE

IF ADDITIONAL PERMITS ARE UNNECESSARY, THIS WILL SERVE AS ZONING APPROVAL FOR BUILDING PERMITS TO BE ISSUED.

DATE: _____ ZONING COMMISSION: _____