



APPLICATION FOR VARIANCE

BLANCHESTER, OHIO

APPLICATION NO. _____

Name of Applicant: _____

Mailing Address: _____

Phone Number: Home: _____ Business: _____

1. **Locational Description:** Subdivision Name: _____

Section _____ Township _____

Range _____ Other Designation _____

Block _____ Lot No. _____

2. **Nature of Variance:** Describe generally the nature of the variance _____

In addition, plans in triplicate and drawn to scale must accompany this application showing the dimensions and shape of the lot, the size and locations of existing buildings, the locations and dimensions of proposed buildings or alterations, and any natural or topographic peculiarities of the lot in question.

3. **Justification of Variance:** For a variance to be granted, the applicant must prove to the Board of Zoning Appeals that one of the following applies.

- a. The strict application of the provisions of the Ordinance would result in practical difficulties or unnecessary hardship inconsistent with the general purpose and the intent of this Ordinance.
- b. There are exceptional or extraordinary circumstances or conditions applying to the property involved or to the intended use or development of the property that do not apply generally to other properties or uses in the same zoning district or neighborhood.
- c. The granting of such variance will not be of substantial detriment to the public interest or to the property of improvements in the district in which the variance is sought, and will not materially impair the purpose or intent of this Ordinance.

I certify that the information contained in this application and its supplements is true and correct.

Date _____
Applicant

For Official Use Only

Date Filed with Board of Zoning Appeals _____

Date of Notice in Newspaper _____

Date of Public Hearing _____

Date of Notice to Adjacent Property Owners _____

Fee Paid \$ _____

Decision of Board: Approved: _____
 Denied: _____

If approved, the following conditions and safeguards were prescribed:

1. _____
2. _____
3. _____

If denied, reason for denial. _____

Date _____ Blanchester Board of Zoning Appeals
 _____ Chairperson