



APPLICATION FOR VARIANCE
***to be attached to corresponding**
Application for Zoning Certificate

WEATHERSFIELD TOWNSHIP
"Come Home to Weathersfield"
1451 Prospect Street
Mineral Ridge, Ohio 44440
Phone: (330) 652-6326 Fax: (330) 544-7491
www.weathersfieldtp.com

Property Address _____ Zoning District _____

Property Owner _____

Applicant (if different) _____

1. State the current zoning of the property and the current use of the property: _____

2. Provide the names and addresses of all property owners next to and across the street from the property: _____

3. Describe the proposed use of the property, including all proposed construction: _____

4. State the specific Variance(s) requested, including each specific provision of the Zoning Regulations from which a Variance is requested: _____

5. Describe the impact of the requested Variance(s) upon adjoining property owners and the Township, considering the effect of such elements as noise, light, odor, vibration and traffic, and how the variance will be compatible with adjacent and other properties in the District: _____
