

**APPLICATION FOR CONDITIONAL USE  
BOARD OF ZONING APPEALS, HOCKING TOWNSHIP, OHIO**

Application No. \_\_\_\_\_

Application Fee: \$ \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Mailing Address of Applicant: \_\_\_\_\_

Property Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Best Phone Number to Be Reached at: \_\_\_\_\_

1. Location Description: Parcel Number: \_\_\_\_\_

Section \_\_\_\_\_, Township of Hocking Range \_\_\_\_\_

Acreage of Property \_\_\_\_\_ Current Property Zoned: RR \_\_\_\_\_ NB \_\_\_\_\_ R1 \_\_\_\_\_

(If not in a platted subdivision, attach a legal description)

2. Nature of: Describe generally the nature of the conditional use: \_\_\_\_\_

\_\_\_\_\_

**The plans drawn to scale must accompany this application showing Dimensions and shape of the lot, the size and locations of existing buildings, locations and Dimensions of proposed buildings or alterations, and any natural or topographic peculiarities of the lot in question. A total of 9 complete packets shall be submitted to the Zoning Inspector. The packet shall include: a completed application, copy of the parcel from the auditor's website showing parcel and surrounding parcels, drawing(s) showing the plans etc., and explanation in writing why conditional use is wanted.**

**Application fee Payable to Hocking Township Board of Trustees**

3. Justification of Conditional Use: In order for a conditional use to be granted, the applicant must prove to the Board of Zoning Appeals that the following items are true: (Please attach these comments on a separate sheet)

A. Special conditions exist

B. That a literal interpretation of the resolution would deprive the applicant of rights enjoyed by others property owners

C. Name and Addresses

I certify by my signature below that the information contained in this application and its supplements are true and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant(s) Signature

Printed Name(s) \_\_\_\_\_