

Village of Berlin Heights
Zoning Department, PO Box 216, Berlin Heights, OH 44814
Ph 419-599-2097

APPLICATION FOR ZONING AMENDMENT

1. Name of Applicant _____
Name of Agent _____
Mailing Address _____

2. Location Description _____
Attach copy of deed
Erie County Tax Parcel # _____

3. Survey Sketch
The property in question shall be surveyed by a registered surveyor, and is as set forth on the accompanying sketch two (2) copies of which shall show the following pertinent information:
 - a. North pointer on sketch
 - b. Dimensions on all lines and bearings shown where necessary
 - c. All lines shall be labeled to aid in checking parcel descriptions, such as county line, township line, section line, lot line, center line or any other line which may require identifications
 - d. Proposed area of parcel subject to requested rezoning
 - e. Sketch shall bear surveyor's seal

4. Existing use _____

5. Present zoning district _____

6. Proposed use _____

7. Proposed Zoning District _____

8. Supporting information: Please attach the following items to the application:
 - a. A list of all property owners and their mailing addresses within 300 feet of the property

- b. A statement of how the proposed rezoning relates to the comprehensive plan
- c. The proposed amendment to the zoning map or text in ordinance form, approved as to form by the Village legal advisor

Date: _____

Applicant's Signature

(For official use only)

Date filed _____

Fee Paid \$ _____

Date of Notice in Newspaper _____

Date of Notice to adjacent property owners _____

Date of Meeting of Village Planning Commission _____

Recommendation of the Village Planning Commission _____

Date of Notice in Newspaper _____

Date of Hearing be Village Council _____

Recommendation of Village Council _____