APPLICATION FOR HEARING
TO
COLERAIN TOWNSHIP ZONING HEARING BOARD

____ **Request for Variance** _____ **Special Exception**

_____**Appeal from the Zoning Officer** _____ **Unified Appeals**

_____ **Challenge to the Validity of the Zoning Ordinance or Map**

A. Applicable Section of the Ordinance under which a hearing is being requested:

_____

_____

B. If Variance, what variance is requested:

_____

_____

(Attach extra sheet if more space is required.)

C. If Appeals, what is the error of the Zoning Officer?

_____

_____

(Attach extra sheet if more space is required)

D. Grounds for Challenge or other errors suggested:

_____

_____

E. Provide all information on attached sheet and any other information required by the Zoning Ordinance.

Name of Property Owner: _____
Address of Property Owner: _____
Phone number of Property Owner: _____
Property Address:_____

Signature of Property Owner: _____
Date: _____

Name of Applicant: _____
Address of Applicant: _____
Phone Number of Applicant: _____
Interest of Applicant: _____

_____

Signature of Applicant: _____ Date: _____

Zoning Hearing Board Fees: $ 750.00 per hour plus $ 240.00 an hour for time over an hour