



LIBERTY
TOWNSHIP * FOUNDED 1808

2845 Home Rd., Powell, OH 43065 Zoning Office
740-938-2010 Fax 740-938-2001 www.libertytp.org

APPLICATION FOR
**DEVELOPMENT PLAN
VARIATION**

FILE DPV# _____ DATE: _____

FEES: \$600.00 _____ RECEIPT # _____

CURRENT ZONING DISTRICT _____

CURRENT DEVELOPMENT PLAN _____

SUBJECT PROPERTY	ADDRESS: _____
	CITY/STATE/ZIP: _____
	SUBDIVISION: _____ LOT #: _____ ACRES: _____
	CURRENT ZONING DISTRICT: _____ CURRENT USE: _____
	RANGE: <u>19</u> TOWNSHIP: _____ SECTION: _____ FARM LOT(S)#: _____

CURRENT PROPERTY OWNER(S)	NAME: _____
	ADDRESS: _____
	CITY/STATE/ZIP: _____
	TELEPHONE: _____
	EMAIL ADDRESS: _____

VARIATION(S) REQUESTED	_____

SIGNATURES	The undersigned certifies that this application (both sides) and the attachments thereto contain all information required by the Liberty Township Zoning Resolution, that all information contained herein is true and accurate and is submitted to induce the requested zoning change, and agrees to be bound by the provisions of the Zoning Resolution of Liberty Township, Delaware County, OH. The undersigned also gives Liberty Township permission to place signage on subject property to announce hearings.	
	PROPERTY OWNER: _____	DATE: _____
	PROPERTY OWNER: _____	DATE: _____
	DEVELOPER: _____	DATE: _____

RECEIVED BY: _____ DATE: _____

The Liberty Township Zoning Resolution and Comprehensive Plan are available for review at the Zoning Office or you may download them from the Township's website: www.libertytwp.org

Note: The initial application fee covers one hearing. If additional hearings are requested by the applicant, additional fees will be charged in accordance with the adopted fee schedule, and are payable before the next hearing will be scheduled.

SUBMITTAL REQUIREMENTS	<p>Fees AND one(1) completed original application form AND the following arranged into ten (10) packets:</p> <ol style="list-style-type: none">1) Legal description of subject property in both text and map form.2) List of all owners of property within, contiguous to, directly across the street from, and within two hundred feet (200') of the perimeter boundaries of subject property, and their current mailing addresses.3) All drawings/plans must be measureable to the scale as listed on the document.4) Association or Developer approval, if applicable <p>*You may also include any supporting documentation.</p>
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CONTACT INFORMATION	<p>The Liberty Township Zoning Secretary will contact you or your designated representative in order to schedule your hearing. Please provide the following information:</p> <p>Contact Person: _____</p> <p>Email Address: _____</p> <p>Telephone: _____</p> <p>Mailing Address: _____</p> <p>_____</p>
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Please make sure all required information is provided. **Incomplete applications will not be accepted.**

OFFICE USE ONLY	<p>Will be heard by: <input type="checkbox"/> Board of Zoning Appeals <input type="checkbox"/> Zoning Commission</p> <p>Date of Hearing: _____</p>
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