

**LIBERTY TOWNSHIP**  
**Delaware County, Ohio**

**APPLICATION FOR**  
**REZONING TO PLANNED COMMERCIAL (PC)**

*FEE: see fee schedule*      **NOTE:** The initial application fee covers the two hearings only. If the applicant requests a tabling, a reschedule fee will be charged for each subsequent hearing and must be paid prior to the next hearing being scheduled.

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

*This is an application for:*      \_\_\_\_\_ **Rezoning and Preliminary Development Plan**  
(check one)                              \_\_\_\_\_ **Rezoning and Preliminary and Final Development Plan**

**File number:**      LTZ- \_\_\_\_\_      **Date filed:** \_\_\_\_\_

**Fee paid:** \_\_\_\_\_

**Name of Owner:** \_\_\_\_\_

**Name of Developer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City/State/Zip** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Telephone:** \_\_\_\_\_

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

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

**Address of property:** \_\_\_\_\_

**Name of Subdivision:** \_\_\_\_\_

**City/State/Zip:** \_\_\_\_\_

**Lot Number(s):** \_\_\_\_\_

**Range:** 19      **Twp.:** \_\_\_\_\_      **Section:** \_\_\_\_\_      **Farm Lot#** \_\_\_\_\_

**Total acreage:** \_\_\_\_\_      **Acreage to be rezoned:** \_\_\_\_\_

**Present Zoning District:** \_\_\_\_\_      **Requested Zoning District:** \_\_\_\_\_

**Present Use:** \_\_\_\_\_

**Do you believe the proposed use(s) to be in conformity with the Comprehensive Plan? Why?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
The undersigned certifies that this application and the attachments hereto contain all information required by the Liberty Township Zoning Resolution and that all information contained herein is true and accurate and is submitted to induce the amendment of the Zoning Map, or Zoning Resolution Applicant agrees to to bound by the provisions of the Liberty Township Zoning Resolution.

**SIGNATURES:**

**OWNER** \_\_\_\_\_      **DATE:** \_\_\_\_\_

**OWNER** \_\_\_\_\_      **DATE:** \_\_\_\_\_

**DEVELOPER** \_\_\_\_\_      **DATE:** \_\_\_\_\_

**RECEIVED & ACCEPTED BY:** \_\_\_\_\_      **DATE:** \_\_\_\_\_  
**ZONING INSPECTOR** \_\_\_\_\_

***SUBMITTAL REQUIREMENTS:***

***The following must be submitted with the required application fee prior to each hearing being scheduled:***

- \* One (1) completed application form with OWNER(S) ORIGINAL SIGNATURE(S); AND
- \* Arrange the following into fifteen (15) packets:
  - Legal description and map of metes and bounds of subject property; AND
  - List of current owners of all properties within 200 feet of the boundaries of the subject properties and those owners' complete, current mailing addresses, AND
  - All information required to be submitted under the applicable section(s) of the Liberty Township Zoning Resolution; AND
  - Any other supporting documentation in regards to this application.

***all drawings and plans must be to-scale and must be folded to fit into a legal-sized folder***

***INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED***