

## **APPLICATION FOR CONDITIONAL USE PERMIT**

**Board of Zoning Appeals** 

The undersigned individual(s), being the owner(s) of or being an applicant "party of interest" bearing written authorization of the owner(s) of the following described property hereby apply to the Painesville Township Board of Zoning Appeals for a conditional use permit for the use specified below. Should this application be approved, it is understood that it shall only authorize that specified use as described in this application and any conditions or safeguards imposed and required by the Board of Zoning Appeals.

Name of Property Owner(s):				
Mailing Address: Telephone Number:	Home:	Business:	Cell:	
Name of Applicant(s):				
Address of Applicant(s):				
Telephone Number:	Home:	Business:	Cell:	
Location Description:	Permanent Parcel #		Zoning District:	
Location Address:	(Attach a logal dasc	rintion)		
Existing Use(s):	,	• ,		
Description of Proposed Co	Home:Business:Cell:			
packages of documents which a the location of buildings, equipm parking and loading areas, trai construction timeline, evidence of list of contiguous properties inclused addresses. Also attach a narra vibration, and odor effects on adjute relationship of the proposed us sureties, etc., as are required by	address the following ite tent and installations), of fic access and international financial capability, opuding those properties ative statement relative onling property and the tent to the comprehensive Section 12.05 or any of the tent and the section 12.05 or any of the tent and the section 12.05 or any of the tent and the te	ems and information; the plant drainage (with analysis of any all traffic circulation (with an en space, landscaping, utilitied directly across the street with to the above requirements general compatibility with adjusted plan. Attach such other other applicable section of the	n for the proposed use (drawn to scale, showing impact on property and contiguous properties) halysis of impact of requested use on traffices, signs, yards and refuse and service areas. In names of property owners and current mailing and explain the economic, noise, glare, fumes accent and other properties in the district, and the documents, written evidence, plans, drawings a Painesville Township Zoning Resolution for the	
Date:		Property Ow		
Fee: \$				
		Property Ow	ner / Applicant - Signature	

This Side For Official Use Or	nly - Painesville Township Board of Z	Zoning Appeals	s
Date Filed:	Fee Pd :	Check # _	/ Cash
Date of Public Hearing:	Date of Notice to Adjacent Property Owner(s	s):	
Notice Sent To Newspaper:	Date Published :		
Decision of Board Of Appeals:	Ayes:	Nays:	Abstains:
If approved, the following safeguards/conditions	were prescribed/imposed:		
If disapproved, the reasons for refusal (findings	of facts):		
Board of Zoning Appeals Chairman	Date		
Board Of Zoning Appeals Secretary	Date		
This Sec	ction For Zoning Inspector Use Only		
Relevant Zoning Resolution Section			
If approved, CERTIFICATE NUMBER ISSUED _			
If disapproved, DATE FINDINGS OF FACT RECI	EIVED BY APPELLANT		_