



Case No. _____
Date: _____

ZONING ORDINANCE CHANGE APPLICATION

Text Amendment

Application Fee: \$150.00

By virtue of this application, the undersigned owner(s) hereby request a change in zoning district classification to the subject property as described below.

1. Owner's Name: _____ Phone: _____

Address: _____ City/State/Zip: _____

Email of Owner: _____

2. Owner's Agent: _____ Phone: _____

Address: _____ City/State/Zip: _____

Email of Agent: _____

3. Legal description of subject property: (City Lot #): _____

(Address): _____

4. Existing zoning: _____ Proposed zoning: _____

5. Existing use: _____ Proposed use: _____

6. Supporting Information: The owner/agent must:

A. List all those persons (including current addresses) having an interest in the subject property whose consent is required to authorize the processing of this application.

Name (print)

Address

_____	_____
_____	_____
_____	_____

Development / Planning / Inspection Departments

20 E. Central Ave. • Miamisburg, Ohio 45342
937-847-6532 • FAX 937-847-6662

- B. Include two (2) copies of a plan of the site or property which triggered the request for a Zoning Code text amendment showing the location of all buildings, parking and loading areas, traffic access and traffic circulation, open spaces, landscaping, refuse and service areas, utilities, signs, yards, schedule of development, and such other information as may be required to determine if the proposed text amendment meets the intent and requirements of this ordinance. See Chapter 1294 and 1296 of the Zoning Ordinance of Miamisburg, Ohio for information regarding site design standards for certain uses within the City of Miamisburg.

- C. Attach the proposed text amendment, highlighting the proposed changes to the code, whether these changes include the addition of new text or the removal of existing text. This text amendment must be approved as to form by the Law Director of the City of Miamisburg.

The owner(s) and/or the owner's agent certify that the information contained herein, and any information provided as exhibits herewith, is correct. The owner(s) also by virtue of this request grants to those public officials/staff responsible for the review of this application, permission to inspect the subject property.

NOTE: The fee (\$ 150.00) for this application is not refundable.

Signature of Agent: _____ Date: _____

Signature of Owner: _____ Date: _____

Sworn to and subscribed before me this _____ day of _____, 20__.

Notary Public

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FOR OFFICE USE ONLY

Fee: _____

Received by: _____