

City of Willard



631 Myrtle Avenue
P. O. BOX 367 • WILLARD, OH 44890-0367
www.willardohio.gov

ZONING AMENDMENT FORM

Business Address _____

Property Owner _____ Phone _____

Address _____

Present Building Use _____

Present Zoning District _____

Proposed Building Use (New or Change of Use) _____

Proposed Zoning District _____

The following information shall be required to be filed along with an application for a district change:

(1) Fifteen copies of a vicinity map, at a scale approved by the Code Enforcement Officer, showing property lines, thoroughfares, existing and proposed zoning, existing and proposed buildings and uses, utility lines and easements, and such other items as may be required by the Code Enforcement Officer;

(2) A list of all property owners who are within, contiguous to or directly across the street from the parcel(s) proposed to be rezoned, with their mailing addresses, and others who may have a substantial interest in the case, except that addresses need not be included where more than ten parcels are to be rezoned;

(3) A statement on how the proposed amendment relates to the Comprehensive Plan

I HEARBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF THE CITY OF WILLARD ZONING ORDINANCES WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT.

SIGNATURE OF OWNER/AUTHORIZED AGENT

DATE