

**McKean Township, Ohio**  
**Board of Zoning Appeals**  
**Application for Zoning Variance**  
**(Refer to McKean Zoning Resolution Article 26.9)**  
**(Please Print)**

Application Number    V   \_\_\_\_\_

Base fee \$600<sup>00</sup>\_\_\_\_\_

Applicant \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_ E-mail \_\_\_\_\_

1. Owner \_\_\_\_\_ Address \_\_\_\_\_

Phone \_\_\_\_\_

2. Property Address \_\_\_\_\_ Lot# \_\_\_\_\_

Subdivision \_\_\_\_\_ Or Parcel Number \_\_\_\_\_

3. Zoning district \_\_\_\_\_

4. Existing use \_\_\_\_\_

5. Applicant is applying for a variance from \_\_\_\_\_

6. Describe the nature of the variance

\_\_\_\_\_  
\_\_\_\_\_

7. Please attach scaled drawing showing existing and proposed structures with building sizes and yard dimensions

8. Attach any other requested, supplemental, or necessary documentation or information

9. Attach a narrative statement demonstrating that the requested variance conforms to the following standards:

- a. That special conditions and circumstances exist which are peculiar to the land, structure, or building involved and which are not applicable to other lands, structures, or buildings in the same district.
- b. That a literal interpretation of the provisions of this resolution would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of this resolution.
- c. That special conditions and circumstances do not result from the actions of the applicant.
- d. That granting the variance requested will not confer on the applicant any special privilege that is denied by this resolution to other lands, structures, or buildings in the same district.

. The applicant hereby certifies that all information and attachments to this application are true and correct.

Applicant's signature \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

(Official use below)

Date complete application received \_\_\_\_/\_\_\_\_/\_\_\_\_ by \_\_\_\_\_

Date of neighbor notifications mailed \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of newspaper advertisement of hearing: \_\_\_\_/\_\_\_\_/\_\_\_\_

Advertised in \_\_\_\_\_

Date of hearing \_\_\_\_/\_\_\_\_/\_\_\_\_

Date of action on Variance application number \_\_\_\_\_

\_\_\_\_/\_\_\_\_/\_\_\_\_ (approved denied)

Reasons, if denied

\_\_\_\_\_

\_\_\_\_\_

Board of Zoning Appeals Chairman

\_\_\_\_\_ printed name

(Form revised 07/02/20 ser)