

HARRISON TOWNSHIP
Board of Zoning Appeals
5945 N. Dixie Drive, Dayton, OH 45414
(937) 890-5611 Fax (937) 454-4831
www.harrisontownship.org

INSTRUCTION FOR CONDITIONAL USE PERMIT APPLICATION

A completed application must be returned to:

Harrison Township Office
Development Department
5945 N. Dixie Drive
Dayton, Ohio 45414

1. The following information must be submitted with the Conditional Use application:

- a) A detailed map showing all property within 500 feet.
- b) List all property owners within 300 feet for the property for which Conditional Use is being requested. These names shall be those appearing on the current Montgomery County Auditor's tax list or the Montgomery County Treasurer's mailing list at www.mcrealestate.org. Addresses must include zip codes and be placed on the attached mailing labels.
- c) Submit six (6) copies of Plot plan drawn to scale no less than 1"=20' showing: the entire lot and indicating dimensions, all existing and proposed buildings and distances to property and/or right-of-way lines, adjacent street right-of-ways, off street parking areas, curb cuts and access ways loading spaces, landscaping, screening, exterior lighting and any information that may be pertinent to the application
- d) Any other plans, brochures, pamphlets, or applicable material relating directly to the case

2. Upon completion of the application, you will be notified by written notice when the hearing date of your application is scheduled. Failure of the applicant to attend the meeting will result in a delay of a decision or cancellation of the case.

3. A check for two hundred fifty (\$250.00) dollars, made out to Harrison Township, must be submitted at the time application is made.

4. An applicant may withdraw the application for a Variance at any stage of the proceeding by giving written notice to the Harrison Township Board of Zoning Appeals; however, the application fee is non-refundable.

5. Cut-off date for submission of an application for the next two meeting dates are:

Cut-off Date _____ Meeting Date _____

Cut-off Date _____ Meeting Date _____

APPLICANT MUST APPEAR AT THE MEETING

