

**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 VARIANCE 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 Variance application:

- a.) A detailed map showing all property within 500 feet.
- b.) List all property owners located within 300 feet of the property for which the Variance 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](http://www.mcrealestate.org). Addresses must include zip codes and be placed on 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 accessways 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**

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**VARIANCE APPLICATION**

Case Number \_\_\_\_\_

**Applicant Information:**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Phone Number: Home \_\_\_\_\_ Business \_\_\_\_\_

The Applicant is the:                    { } Owner                    { } Lessee                    { } Agent

**Local Information:**

Location of Property \_\_\_\_\_

The property for which the Variance Application is being made contains approximately \_\_\_\_\_  
acres/square feet and is located along the \_\_\_\_\_ side of \_\_\_\_\_  
approximately \_\_\_\_\_ feet \_\_\_\_\_ of \_\_\_\_\_

**Nature of the Variance:**

Describe generally the nature of the variance, include the specific provisions of the Zoning Resolution  
from which the variance is requested, attach additional comments on a separate sheet if necessary. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attachments:**

Attach a statement regarding the compatibility of the proposed use with adjacent property, and any other  
such information as may be pertinent to the application.

I hereby swear that the information contained in this application and any supplements made part of the  
application are true, correct and complete to the best of my knowledge and belief. I understand if the  
information in this application is not true, correct or complete, any permit issued in connection with this  
variance may be invalid, with the result that I may be required to remove all buildings and my expense.

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Applicant's Signature*

**\*TOWNSHIP USE ONLY\***

Case Number: \_\_\_\_\_

Date Filed: \_\_\_\_\_

Date of Public Hearing: \_\_\_\_\_