

**Z**

**DEVELOPMENT SERVICES  
DEPARTMENT  
SPRINGFIELD TOWNSHIP  
HAMILTON COUNTY, OHIO**

APPLICANT - Complete all applicable spaces on this form side

USE BALL POINT PEN OR TYPEWRITER

PROPERTY ADDRESS \_\_\_\_\_  
 BOOK \_\_\_\_\_ PLAT PAGE \_\_\_\_\_ PARCEL \_\_\_\_\_ LOT NUMBER \_\_\_\_\_

IDENTIFICATION	NAME	STREET ADDRESS	CITY	ST	ZIP	PHONE NO.
OWNER						
CONTRACTOR						
PLANS BY						

**PROPOSED GENERAL USE**

Residential     Commercial     Industrial

**COST OF PROJECT**  
 \$ \_\_\_\_\_

**TYPE OF IMPROVEMENT**

New Building     Accessory Structure/Use  
 Addition     Permanent Sign    Sq. Ft. \_\_\_\_\_  
 Alteration     Temporary Sign    Sq. Ft. \_\_\_\_\_  
 Repair     Fence    Height \_\_\_\_\_  
 Replacement     Deck    \_\_\_\_\_  
 Change of Use     Pool    In Ground \_\_\_\_\_ Above Ground \_\_\_\_\_  
 Other \_\_\_\_\_

**RESIDENTIAL**

One Family    No. of Parking Spaces \_\_\_\_\_  
 Two Family    Garage \_\_\_\_\_  
 Multi-Family    No. Units \_\_\_\_\_ Other \_\_\_\_\_

**MISCELLANEOUS NON-RESIDENTIAL**

Church/Religious     Day Care Center  
 School/Educational     Hospital, Institution, Nursing Home  
 Public Structure/Utility/Park  
 Private Non-Commercial Recreation  
 Bed and Breakfast    Describe \_\_\_\_\_  
 Other \_\_\_\_\_

**COMMERCIAL**

Professional Office     Auto Related Service  
 Banks/Financial Institutions     Motel/Hotel  
 Billboard Advertising     Veterinary Clinic/Kennel  
 Restaurant    Drive Thru \_\_\_\_\_  
 Retail Sales    Type \_\_\_\_\_  
 Commercial Recreation    Type \_\_\_\_\_  
 Other    Describe \_\_\_\_\_

**INDUSTRIAL**

Warehouse/Distribution     Bottling/Packaging  
 Contractor Storage Yard     Trucking/Motor Freight Terminal  
 Minor Assembly/Fabricating    Describe \_\_\_\_\_  
 Manufacturing/Processing    Describe \_\_\_\_\_  
 Other    Describe \_\_\_\_\_

The owner of this building and undersigned, do hereby covenant and agree to comply with all the laws of the State of Ohio and the Zoning Resolution of Springfield Township, pertaining to building and buildings, and to construct the proposed building or structure or make the proposed change or alteration in accordance with the plans and specifications submitted herewith, and certify that the information and statements given on this application, drawings and specifications are to the best of their knowledge, true and correct.

Application by \_\_\_\_\_ Date \_\_\_\_\_  
 Address \_\_\_\_\_ Phone \_\_\_\_\_

**DO NOT WRITE IN THIS BOX (OFFICE USE)**

Board of Zoning Appeals Case No. \_\_\_\_\_ Court Case No. \_\_\_\_\_  
 Zoning Approved by: \_\_\_\_\_ Date \_\_\_\_\_  
 Zoning Certificate: \_\_\_\_\_ Date \_\_\_\_\_  
 Approved for issue by: \_\_\_\_\_ Date \_\_\_\_\_

Date Zoning Certificate Issued \_\_\_\_\_ Certificate Number \_\_\_\_\_  
 Certificate and Inspection Fee \$ \_\_\_\_\_

Date of Application \_\_\_\_\_

Address: \_\_\_\_\_  
 Application No. \_\_\_\_\_ Parcel No. \_\_\_\_\_ Lot No. \_\_\_\_\_

Reviewer \_\_\_\_\_ Approved \_\_\_\_\_ Refused \_\_\_\_\_ Fee \_\_\_\_\_ Paid \_\_\_\_\_  
 Due \_\_\_\_\_ Zone \_\_\_\_\_ Page No. \_\_\_\_\_ BZA \_\_\_\_\_  
 Revision \_\_\_\_\_ Inspector \_\_\_\_\_ Zoning Commission \_\_\_\_\_