APPLICATION FOR CHANGE IN ZONING DISTRICT CLASSIFICATION

109 Harrison St., PO Box 386, Galena, Ohio 43021 (740) 965-2484, Fax (740) 965-5424 www.galenaohio.gov | zoning@galenaohio.org



Date	Case No		
	PART 1, Section	ı A	
Name of Applicant: _			
Applicant's Mailing A	Address:		
Phone:	Email:		
Name of Owner (if di	fferent from applicant):		
Owner's Mailing Add	lress:		
Phone:	Email:		
Subject Real Estate is	described as Lot No	PIN:	
Of Subdivision (or Ac	ldition)		
Street/Location Addre	ess:		
Located on (N, E, S o	r W) side of		
Between			(Street, Road etc.)
Approximately	feet	(N, E, S or W)	of the intersection
of	(Street, Road etc.) and		(Street, Road etc.).

PART 1, Section B

TO THE VILLAGE OF GALENA PLANNING & ZONING COMMISSION:

We, the undersigned owners of the property described above and documented on the attachments submitted with this application, hereby petition the Village of Galena Planning & Zoning Commission to change said property"

FROM
TO
Such change is necessary for the preservation and enjoyment of a substantial property right
because:
Such change will not be materially detrimental to the public welfare nor to the property of other persons located within the vicinity because:
THIS APPLICATION IS ACCOMPANIED BY:
1) Plat maps of the subject property.
2) Legal description of the subject property.
3) Development plan for property.
4) Contact information for all parties pertinent to rezoning and development plan.
Name and Address of Attorney for Applicant (if any):

PART 2

	The applicant must verify a list of names and addresses of all the owners of record of real estate within two hundred (200) feet of the exterior boundaries of the subject property as such are shown in the Delaware County Recorder's Office. Such list must be attached to the
	application at the time of the filing of the same with the Village of Galena Zoning and Planning Commission.
	The applicant must further furnish to the Planning & Zoning Commission six (6) copies of a plat map for the subject property, showing the location of any proposed buildings, and must further, at the request of the Planning & Zoning Commission, shall furnish to the Commission six (6) copies of a topographical map of the subject property.
	The legal description of the subject property as shown by the Delaware County Recorder's Office must be attached to the application.
	The current application fee as established by the Village Council must accompany each application. Make checks payable to the Village of Galena.
Ma	ail application and fee plus all other requested attachments to:
	Village of Galena Planning & Zoning Commission 109 Harrison St. PO Box 386 Galena, Ohio 43021-0386.
Sig	gnature of Applicant:
Of	ficial Title (if any):
Sw	vorn to and subscribed in my presence this day of, 2
No	otary Public:
M	v Commission Expires

PART 3 (To be filled out by Zoning Clerk/Inspector)

Date Application Rec	eceived:	
Attachments:	_ Legal Description of Subject Property	
	Mailing list of property owners within 200'	
	_ Plat Maps (No.)	
	_ Topo Maps (No.)	
	_ Fee	
	Other:	
Date Set for Hearing:	g;	
Publication in:	on	
	on	
Property Posted:	(Date)	
	nning & Zoning Commission:	
Date and Method of I	Notifying Applicant of Action by Commission:	
Date Zoning Certifica	cate Permit Issued:	
Matthew Shock Village of Galena Zoning Inspector		