

Case # \_\_\_\_\_

**ROOTSTOWN TOWNSHIP ZONING BOARD OF APPEALS  
APPLICATION FOR CHANGE OF NON-CONFORMING USE**

4152 Tallmadge Road, Rootstown, OH 44272

Phone: 330-325-9341

Email: zoning@rootstowntwp.com

Name of applicant: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Phone number: (Home) \_\_\_\_\_ (Business) \_\_\_\_\_

The following items must be submitted with your application:

1. Proof of ownership, legal interest, or written authority to represent property owner
2. Ten (10) copies of a site plan of the lot, drawn to scale, showing the exact dimensions and area of the lot to be built upon or utilized. Plans shall include:
  - a. Size and location of existing buildings
  - b. Location and dimensions of proposed buildings, structures, or alterations
  - c. Architectural or construction plans, also drawn to scale
3. A narrative statement explaining the original non-conforming use and proposed change of non-conforming use (see next page)
4. A list of property owners contiguous to, and directly across the street from, the property for which a change of non-conforming use is requested, with their addresses from the current tax record and one (1) copy of the applicant's current tax map. List of property owners needs to be in this format:
  - Parcel number
  - Name of owner
  - Mailing address of owner
5. Application fee is \$300 and is NON-REFUNDABLE. Checks payable to Rootstown Township.

The application must be submitted to the Zoning Secretary at least two weeks prior to the hearing date. All hearings are held on the first Tuesday of the month.

Location of Subject Property/Use

Street address: \_\_\_\_\_

Parcel number: \_\_\_\_\_

Subdivision name and lot #: \_\_\_\_\_

Zoning District property is located in: \_\_\_\_\_

Zoning Resolution Section(s): \_\_\_\_\_

Explanation of Original Non-conforming Use

You may attach additional pages if necessary.

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

Explanation of Change of Non-conforming Use

You may attach additional pages if necessary.

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

I certify that the information contained in this application and its supplements is true and correct.  
The Applicant hereby grants the right and permission to inspect the premises to the board or its designate.

\_\_\_\_\_  
Applicant Signature and Date

Date of Hearing \_\_\_\_\_

Action of Zoning Board of Appeals \_\_\_\_\_