

**Harrisville Township  
Zoning Application**

Type of Appeal:

Case No. \_\_\_\_\_

- Rezoning
- Planned Unit Development
- Other Development
- Site Plan Review
- Variance
- Special Land Use

Scheduled date and time of hearing before the Commission/ZBA \_\_\_\_\_

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**PETITIONER INFORMATION** *(If different than owner):*

Petitioner's name: \_\_\_\_\_ Home telephone \_\_\_\_\_

Petitioner's address: \_\_\_\_\_ Work telephone \_\_\_\_\_

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**OWNER INFORMATION:**

Owner's name: \_\_\_\_\_ Home telephone \_\_\_\_\_

Owner's address: \_\_\_\_\_ Work telephone \_\_\_\_\_

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**PROPERTY INFORMATION:**

Address or location (if vacant, give distance from intersecting roadways):

\_\_\_\_\_

\_\_\_\_\_

Permanent parcel number: \_\_\_\_\_

Zoned district:

EC

SP

FR

A

R-1

R-2

C-1

C-2

I

Property size (attach hand drawn sketch or surveyor's drawing- indicate NORTH with arrow):

Describe proposed use/request:

(Initial) \_\_\_\_\_ I hereby attest that the information I have provided in this petition is, to the best of my knowledge, true and accurate.

(Initial) \_\_\_\_\_ I hereby agree to pay all costs or expenses incurred by the Township resulting from processing of this matter if for any reason I withdraw this petition.

(Initial) \_\_\_\_\_ I acknowledge that all information requested on this petition is required to be complete. Further, that incomplete information may result in the delay of processing this matter.

(Initial) \_\_\_\_\_ I hereby grant permission for members of the Harrisville Township Planning Commission, Zoning Board of Appeals and/or the Township Board to enter upon the above described property for the purposes of gathering information related to this petition. *Granting this permission of entry is optional and will in no way affect any decision toward your petition.*

\_\_\_\_\_  
Signature of petitioner

\_\_\_\_\_  
Date

**This permit expires one (1) year from date of issue unless construction/operation has begun.**

Approved

Denied

\_\_\_\_\_  
Chair, Planning Commission/Zoning Board of Appeals

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

**NOTICE TO THE ZONING ADMINISTRATOR:**

- This form is to be in the hands of the Secretary of the Zoning Board of Appeals within three business days following the scheduling of the meeting by the Chair.
- Any and all information pertaining to this appeal, or the property under review, is required to be submitted with this document.
- All notices published in the local paper(s) shall be included and dated with the date they were published.
- A list of all concerned property owners to whom have been sent notices shall like-wise be submitted. The date such notices were mailed shall be included.
- Verify time and date with Township Custodian.