

Planning Commission Application

Village of Boston Heights
45 E. Boston Mills Road
Boston Heights, OH 44236
(330) 650-4111

Instructions

1. The Planning Commission of the Village of Boston Heights requires the completion of this application in order to appear before the Planning Commission. This application must be submitted to the Planning Commission Clerk no later than 3:30 pm twenty (20) days prior to the requested Planning Commission.
2. Applications to the Planning Commission will be scheduled for hearing only when received by the deadline (specified above) *and* only when found by the Village Zoning Inspector upon review to have been received complete, signed, and compliant with the Planning and Zoning Code. Applications found otherwise upon review will be returned to the applicant and may be re-submitted for a later meeting of the Planning Commission. *It is recommended that applications of any complexity be submitted for review, and all issues resolved, well in advance of the deadline.*
3. Please obtain and read the Planning and Zoning Code of the Village of Boston Heights and the Rules of Procedure of the Planning Commission before completing this application. A copy of each may be obtained from the Village Hall at the address above for a fee.
4. All questions on this application must be answered in their entirety. If the answer to a question is “none” or “not applicable,” so indicate. Attach and list additional and related documents as required.
5. Please attach all documents required by the Planning and Zoning Code of the Village of Boston Heights.
6. Please include the necessary fees and deposits as indicated on the current Planning and Zoning Fee Schedule.
7. Upon completion, please submit the application to the Village Hall office at the address listed above. Please submit the original and two (2) copies of this application and all related and attached documents. If additional sheets are needed. Please label and attach them to this application.
8. FAILURE TO (I) SUBMIT THIS APPLICATION, (II) SUBMIT THIS APPLICATION BY THE REQUIRED DEADLINE, (III) COMPLETE ALL BLANKS ON THIS APPLICATION, (IV) SIGN THIS APPLICATION, (V) ATTACH ALL NECESSARY DOCUMENTS, OR (VI) INCLUDE THE REQUIRED FEES AND DEPOSITS, WILL RESULT IN THE APPLICATION BEING RETURNED TO YOU WITHOUT IT BEING CONSIDERED BY THE PLANNING COMMISSION ON THE DATE REQUESTED.
9. APPLICANT OR AUTHORIZED REPRESENTATIVE MUST ATTEND THE PLANNING COMMISSION MEETING AT WHICH THIS APPLICATION IS TO BE CONSIDERED. FAILURE TO ATTEND THE MEETING MAY RESULT IN THE DISMISSAL OR DENIAL OF YOUR APPLICATION.

DATE RECEIVED:	PC DOCKET NUMBER:	MEETING DATE:
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VILLAGE USE ONLY

Applicant's Information

Type of Entity: ☐ Individual ☐ Corporation ☐ LLC ☐ Partnership

☐ Other (specify): _____ State of Ohio Charter No.: _____

Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

_____ eMail: _____

All relevant names Applicant uses to do business (tradenames, “dba,” etc.) _____

Applicant's Authorized Representative:

Property at Issue

Address / Location: _____

County Parcel #(s): _____

Applicant's Property Interest: ☐ Current Owner ☐ Current Lessee
☐ Other: _____ ☐ Provisional (Contract) Owner ☐ Provisional (Contract) Lessee

If Applicant is not the owner, please attach documentation explaining applicant's interest in the property and state:

Owner Name: _____ Phone Number: _____

Address: _____ Fax Number: _____

_____ eMail: _____

Zoning District: _____ Date of Purchase: _____ Acreage: _____

Current use of property: _____

Names & addresses of owners of property adjacent to and/or within 500 feet (or attach a list thereof):

Planning Commission Action Requested

Please Check Request(s):

<input type="checkbox"/> Conditional Use/Zoning Certificate	<input type="checkbox"/> Preliminary Site Plan Approval
<input type="checkbox"/> Zoning District/Map Change ("Rezoning")	<input type="checkbox"/> Final Site Plan Approval
<input type="checkbox"/> Planning & Zoning Code Text Change	<input type="checkbox"/> Modified/Addendum Site Plan Approval
<input type="checkbox"/> Plat / Subdivision Approval and/or Variance	<input type="checkbox"/> Other: _____

State the proposed use(s) of the property (or existing/continuing use(s), if applicable). List all distinct uses:

Explanation of request(s) (be specific; indicate if an explanatory document is attached to this application):

Applicable Village of Boston Heights Planning and Zoning Code sections: _____

Has the property been the subject of previous Planning Commission / BZA hearings?: ☐ Yes ☐ No

Proposed start date of construction (if applicable): _____

Where the requests of this application do not entirely conform with the Planning and Zoning Code:
The Planning Commission hears requests for variance of the Village's Subdivision Regulations (for platting, subdivision, parcel splits and combinations). The Board of Zoning Appeals hears all other requests for variance of the Planning and Zoning Code; a separate application to the BZA is required for a hearing.

List all variances of the Planning and Zoning Code required for the requests listed on this application:

List Attached Documents:

Fee(s): _____ Deposits(s): _____ Paid by: ☐ Cash ☐ Check
(Please see current fee schedule – note that multiple fees and additional deposits may be required)

By signing below, Applicant certifies that the facts contained in this application are true and complete to the best of Applicant's knowledge, and that the Applicant is duly authorized by the owner of record to make such application.

SIGNATURE OF APPLICANT

DATE: _____

NAME: _____ TITLE: _____
(print name and title; indicate if authorized representative of Applicant and state capacity)

Adopted: December 7, 2022