



# Village of Roaming Shores

2500 Hayford Road  
P.O. Box 237  
Roaming Shores, Ohio 44084

440-563-3132, Administrator: 440-563-5083, Fax: 440-563-5912  
*roamingshoresOH.gov*

## Application for Variance

Permit # \_\_\_\_\_

Name of Applicant(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Business \_\_\_\_\_ Fax \_\_\_\_\_

E-mail address \_\_\_\_\_

### 1. DESCRIPTION OF THE LOCATION

Street Address \_\_\_\_\_

On a separate sheet write a short description of the property. In addition, attach plans drawn to scale showing dimensions and shape of the lot, size and locations of existing buildings, the locations and dimensions of proposed buildings or alterations, and any natural or topographic aspects of the lot in question.

### 2. NATURE OF THE VARIANCE

On a separate sheet describe the specific nature of the variance being requested.

### 3. JUSTIFICATION FOR THE VARIANCE

In order for a variance to be granted, the applicant must provide relevant facts establishing and substantiating that the variance request conforms to the standards listed in Section 5 of the Village Building Ordinance. Please submit these facts on a separate sheet of paper.

I/We certify that the information contained in this application and its supplements is true and correct. I/We authorize all Board of Zoning Appeals members access to the premises in question to perform any duties imposed upon them. I/We understand that when the BZA members visit the property they are not permitted to discuss the facts of the application with anyone prior to the public hearing.

Date \_\_\_\_\_ Applicant(s) \_\_\_\_\_

\_\_\_\_\_

Received By \_\_\_\_\_ Date \_\_\_\_\_

***A fee of \$150.00 as established by ordinance must accompany this application.***

Approved or Rejected by BZA members:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_