

VILLAGE OF ANDOVER

134 Maple Street PO Box 1267
Andover, OH 44003
Phone: 440-293-4747
Fax: 440-293-4878
www.andovervillage.com

(office use only)

Conditional Use Permit Application

You **must** fill out the application completely containing appropriate attachments. You **must** include proof of property ownership. You **must attach the filing fee with this application before it will be considered.**

Application Date: _____ Parcel Number(s): _____

Name of Property Owner: _____ Phone: _____

Mailing Address: _____ City/State/Zip: _____

Address of proposed Conditional Use: _____

Description of Current Use: _____

Description of Proposed Conditional Use: _____

1. **Attach the following:** A site plan of the proposed area drawn to scale, showing the location of buildings, parking areas, traffic access and circulation, open spaces, landscaping, refuse and service areas, utilities, signs, yards and existing easements. A final site plan must be prepared by a registered architect or engineer.

Attached: Yes or No

2. **Attach the following:** A narrative statement discussing the compatibility of the proposed use with the existing uses of adjacent properties to include an evaluation of the effects on adjoining properties of such elements as traffic circulation, parking, noise, interference with natural sunlight and views; interference with privacy and quality of life; and any other possible adverse effects on such property owners. Attached: Yes or No

3. **Attach the following:** A list containing the names and addresses of all adjacent property owners of the proposed development. Attached: Yes or No

Conditional Use Application/Filing Fee: \$150.00 Other Amount: \$ _____

Occupancy Type: Residential Commercial Transient **EMAIL:** _____

Under penalties of perjury, I hereby certify that all of the information is truthful and accurate. I acknowledge that I am the deeded property owner and that I grant permission for the aforementioned project to be completed by myself or my authorized agent/builder/contractor. I further acknowledge that the project must meet the current Village of Andover Zoning Code and the State of Ohio Building Code administered by the Ashtabula County Building Department.

(Property Owner Signature)

(Property Owner Address)

Please contact the Zoning Inspector at (440) 293-4747 with any questions.

*****Village Office Use Only*****

Amount: _____ Receipt #: _____ Payment Method: _____ Date: _____ Received By: _____

Conditional Use Permit Application-Continued

Permit/Application Number:

(office use only)

Current Zoning District: Residential-One Family (R-1) (R-2) (R-3) Commercial

Public/Public Quasi Industrial P.U.D.

General Standards for All Conditional Uses:

1. Is in fact a conditional use established by the Zoning Code. [Yes/No]
2. Will be designed, constructed, operated and maintained so as to be harmonious and appropriate in appearance with the existing or intended character of the general vicinity, and that such use shall not change the essential character of the same area. [Yes/No]
3. Will not be hazardous or disturbing to existing or future neighboring uses. [Yes/No]
4. Will be served by essential public facilities and services such as highways, streets, police and fire protection, drainage, refuse, and water and sewer. [Yes/No]
5. Will not create excessive additional requirements at public cost for public facilities and services, and will not be detrimental to the economic welfare of the village. [Yes/No]
6. Will comply with all provisions of the Zoning Code, including setbacks, parking, etc. [Yes/No]
7. Will not create lighting which is a nuisance or in any ways impair safe movement of traffic nor shine directly on adjacent properties. [Yes/No]
8. Will not result in the destruction, loss or damage of a natural, scenic or historic feature of major importance. [Yes/No]
9. Will not involve uses, activities, processes, materials, equipment and conditions of operation that will be detrimental to persons, property or the general welfare by reason of excessive production of traffic, noise, smoke, lighting, fumes, glare or odors. [Yes/No]

Requirements for Specific Conditional Use:

1. Does the applicant's property have the required parking; one spot per bedroom and one spot for an employee? Yes No
2. Please add additional attachments and information for any section as required or needed.