

**REZONING APPLICATION
CITY OF GENEVA, OHIO
DEPARTMENT OF PLANNING AND ZONING**

APPLICANT INFORMATION:

NAME OF APPLICANT _____

MAILING ADDRESS _____ Email: _____

BUSINESS PHONE _____ HOME PHONE _____

SITE INFORMATION:

LOCATION DESCRIPTION _____

PERMANENT PARCEL # _____ SITE ADDRESS _____

EXISTING USE _____ CURRENT ZONING DISTRICT _____

PROPOSED USE _____ PROPOSED ZONING DISTRICT _____

SUPPORTING INFORMATION:

A vicinity map showing property lines, streets, and existing and proposed structures and the types of buildings and uses, and existing and proposed zoning.

A list of property owners and their mailing addresses within, contiguous to, and directly across the street from the proposed rezoning.

A development plan containing any or all of the following data marked:

_____ Preliminary site plan _____ Traffic Analysis _____ Drainage analysis

_____ Proposed assignment of use and subdivision of land (incl. private & common)

_____ Proposed landscape treatment _____ Deed restrictions and protective covenants;

_____ Construction schedule and cost estimates

_____ Other information as deemed necessary by the Planning Commission

I certify that the information contained in this application and its supplements is true and correct.

SIGNATURE: _____ **DATE:** _____

FEE PAID \$ 250.00: _____

DATE FILED: _____ **HEARING DATE:** _____

DATE OF NOTICE TO PARTIES IN INTEREST: _____

DATE OF NOTICE TO NEWSPAPERS: _____

COMMISSION DECISION AND CONDITIONS: _____

DEPARTMENT OF PLANNING AND ZONING _____ **DATE** _____