

<h1 style="margin: 0;">SYLVANIA</h1> <div style="background-color: black; color: white; padding: 2px 5px; text-align: center; font-weight: bold;">T O W N S H I P</div> <h2 style="margin: 10px 0 0 0;">APPEAL</h2>	PLANNIG & ZONING DEPARTMENT 4927 N. HOLLAND-SYLVANIA ROAD SYLVANIA, OH 43560 (419) 885-5276 WWW.SYLVANIATOWNSHIP.COM
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PLEASE PRINT CLEARLY

PROPERTY ADDRESS	
STREET:	PARCEL(S) #
CITY/STATE/ZIP CODE:	ZONING DISTRICT:
LEGAL DESCRIPTION:	APPLICABLE SECTION OF ZONING RESOLUTION:
BRIEF DESCRIPTION OF APPEAL:	

REQUIRED INFORMATION TO BE SUBMITTED	
	COMPLETED APPLICATION FORM
LETTER of INTENTION – Brief statement describing nature of Appeal (separate from application)	
SITE PLAN – Seven (7) 24" x 36" hardcopies plus one (1) electronic copy.	
FEES – Residential - \$150.00 (payable to Sylvania Township Trustees) Commercial/Industrial - \$300.00 (payable to Sylvania Township Trustees)	

PROPERTY OWNER	
NAME:	PHONE:
ADDRESS:	EMAIL ADDRESS:

APPLICANT/AGENT	
NAME:	PHONE:
ADDRESS:	EMAIL ADDRESS:

A Board or Commission may require the property owner to appear in person to provide testimony.

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

PROPERTY OWNER SIGNATURE:	DATE:
APPLICANT SIGNATURE:	DATE:

For Office Use Only		
SYLVANIA TOWNSHIP BOARD OF ZONING APPEALS	DATE:	DECISION:
Conditions of Approval (if any)		