WASHINGTON TOWNSHIP ZONING
COMMISSION
8200 McEwen Road
Dayton, Ohio 45458
(937) 433-0152
APPLICATION FOR CHANGE OF
NON PLANNED DEVELOPMENT ZONING DISTRICT

FOR ZC USE ONLY:
CASE # ______________________ FEE RECEIPT # ______________________
DATE FILED ______________ RECEIVED BY __________ ____________

PLEASE TYPE INFORMATION - USE ADDITIONAL SHEETS AS NECESSARY

The Applicant __________________________________________________________________
Address _______________________________________________________________________

Being the owner(s) of land located at __________________________ hereby make application to have
said land reclassified from the __________________________ zoning district(s) to the
_____________________________ zoning district(s).

A. DESCRIPTION AND/OR LOCATION OF LAND

1. The area of land sought to be reclassified contains approximately _______________ acres,
having a frontage of approximately _______________, feet located (1) along the ____________
side of ____________________________, approximately __________ feet _________ of
______________________________, or (2) at the __________ corner of the
intersection of __________________________________________ and
______________________________________________________.

2. The area of land for consideration is further described on the following:
MICO # _________ and/or Deed Book # __________, Page # __________, and is located in
Section __________, Town __________, Range __________, Washington Township,
Montgomery County, State of Ohio.

03/26/2019
3. Lot # __________ and recorded plat name ______________________________, if in a recorded plat. Permitted uses within the proposed zoning district classification (will) (will not) violate plat covenants.

(The attachment of a copy of the legal description of the land sought to be reclassified will be appreciated.)

B. REASONS TO RECLASSIFY

The applicant shall prepare a definitive statement on this zoning change will fulfill each of these following requirements:

1. Explain the proposed use of the land if reclassified. (Type of use, proposed improvements, sketches of new building(s), and other material pertinent to the reclassification.)

2. How does the proposed reclassification and subsequent development relate to the existing and future land use character of the neighborhood?

3. How will the reclassification be desirable to the neighborhood?

4. If it is your position that the present zoning is not related to the public health, safety, or morals please set forth all facts that would tend to support this position.
5. List other comments that are pertinent to consideration for reclassification. These are listed in the requirements and instructions to be followed in securing a change in zoning.

6. Additional information required for change to a ‘B’ or ‘I’ district:
   
a. Traffic studies indicating to the satisfaction of the Zoning Commission that the development of the district will not cause undue traffic congestion at the proposed location and that the traffic generated by the district will be handled in an efficient manner.

b. Sketches and data showing the types of buildings and landscaping proposed sufficient to satisfy the Zoning Commission that the project will be in harmony with the existing or contemplated development of the area.
C. **AFFIDAVIT**

Before contemplating this application and executing the following affidavit, it is recommended that this application be discussed with the Washington Township Zoning Inspector or a member of his staff.

**APPLICANT’S AFFIDAVIT**

STATE OF OHIO  
COUNTY OF MONTGOMERY

I (we) ______________________________________________________________________________ being duly sworn, depose and say that I am/we are the owner(s) of land included in the application and that the foregoing statement herein contained and attached, and information or attached exhibits thoroughly to the best of my/our ability present the arguments in behalf of the application herewith submitted and that the statements and attached exhibits above referred to are in all respects true and correct to the best of my/our knowledge and belief.

Name (print clearly)  

Signature  

Mailing Address  

City and State  

Phone       Fax

Subscribed and sworn to before me this _______ day of _____________________, 2_____.

Notary Public

Person to be contacted for details, other than above signatory:

Name  

Address  

Phone

03/26/2019
Submittal Cover Page and Checklist
To be included with submittal package

☐ Two (2) copies of the completed application, signed and notarized by the 
property owner.

☐ Ten (10) copies of the site plan showing the following:
  o Public Street (existing and proposed)
  o Existing/proposed easements
  o Parking area diagram (if applicable)
  o Approximate building size and location
  o All access points existing and proposed
  o Proposed lots and amount of buildable area on each lot

☐ Statement describing the provision to be made for the care and maintenance of open space or 
recreational facilities.

☐ One (1) 11”x17” (maximum size) copy of plans submitted.

☐ Two (2) maps showing the property lines of all lands within a distance of five hundred (500) feet 
of any part of the parcel proposed for the Zoning Change.

☐ A list of all owners and their address within five hundred (500) feet of any part of the parcel 
proposed for the Zoning Change. In addition to the list, mailing labels on Avery Laser 5160 
(1x2 5/8 inch) or Avery Copier 5351 (1x2 13/16 inch) shall be provided for every owner 
shown on the list.

☐ Applicable filing fee as established by the Washington Township Trustees. Washington 
Township accepts Visa/Mastercard, cash or check. Please make checks payable to “Washington 
Township Trustees”.

Submittal Preparer/Agency_________________________________ Date___________
Contact______________________________________ Phone__________________________
E-mail_________________________________________________