

**APPLICATION FOR ZONING TEXT AMENDMENT  
FLORENCE TOWNSHIP ZONING COMMISSION**

11011 Chapel Street  
Wakeman, Ohio 44889  
440.742.0026  
[zoning@florencetwp.com](mailto:zoning@florencetwp.com)

**Fee: \$250**  
Make checks payable to:  
Florence Township Trustees

Name of Applicant: \_\_\_\_\_ Email: \_\_\_\_\_

Address of Applicant's property proposed to be changed or affected by the proposed amendment:

\_\_\_\_\_

Parcel # \_\_\_\_\_

Applicant's Mailing Address: \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone Number: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

*\*\* Please note ALL required information MUST be listed. Failure will result in the application not being processed. Additional fees may be assessed to proceed if additional legal ads and notifications (postage) are needed due to incomplete forms.*

**Documentation:** Application for amendments proposing to change, supplement, amend, or repeal any portion(s) of this Resolution, other than the official Zoning Map, must include the application fee, and shall contain at least the following information attached to the application:

- 1) List of all articles and/or subsections of the zoning Resolution requested to be changed;
- 2) Typed current language of the Article(s) and/or Subsection(s) to be amended;
- 3) Typed proposed amended version of the article(s) and/or subsection(s) to be amended;
- 4) A definitive statement of the reason(s) for the proposed amendment;
- 5) A site plan indicating how the site will be developed;
- 6) A list of all adjoining property owners, their parcel numbers, and their mailing addresses and others that may have a substantial interest in the proposed text amendment.

The Township Zoning Inspector will review the Application (or any amended Application) to verify that it is accurate and complete within five (5) days of receipt of the application. Within that time, the Zoning Inspector shall send written notice (Notice of Status) to the Applicant(s) indicating one of the follows: 1) the Application is found to be complete; or 2) The Application has been found to be inaccurate or incomplete. If the Zoning Inspector finds that the application is inaccurate or incomplete, the Notice of Status shall specify the insufficiencies that were found in the Application. The Zoning Inspector's Notice of Status shall be sent by regular U.S. Postal Service mail to the Applicant at the address listed by the Applicant above. If notice of an inaccurate or incomplete Application has been sent, the Application will not be processed until corrections have been made and the Application is complete. The filing date of the application package shall be the date on which all information submitted is found by the zoning Inspector to meet the requirements described in this Application.

As the Applicant, I do hereby certify that I am the Property Owner, or I am submitting the application on behalf of the Property Owner with their knowledge, understanding, and authorization. Furthermore, I hereby certify that the information and statements provided on this application, and any attachments, including the drawings and specifications are true and correct to the best of my knowledge and belief. I understand that all information submitted with this application will be assumed by the Florence Township's reviewing authority to be correct, and the Applicant shall assume responsibility for any error and/or inaccuracies resulting in an improper or incomplete application.

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Date

NOTICE TO APPLICANT: THE BURDEN OF PROOF OF THE NEED FOR THE PROPOSED TEXT CHANGE TO THE ZONING RESOLUTION RESTS WITH THE APPLICANT. APPLICANT IS ADVISED THAT THE TOWNSHIP ZONING COMMISSION SHALL APPLY ARTICLE 8 OF THE FLORENCE TOWNSHIP ZONING RESOLUTION IN ITS CONSIDERATION OF THIS APPLICATION AND SHALL BE SEEKING FROM APPLICANT, AMONG OTHER INFORMATION, THE ANSWERS TO THE QUESTIONS LISTED IN SUBSECTION 8.7 WHEN CONSIDERING ANY DISTRICT CHANGES.