





Village of Ashville  
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**ASHVILLE APPLICATION FOR REZONING (CHANGE IN DISTRICT)
 APPLICATION FOR AMENDMENT TO ZONING CODE/MAP**

Permit Application No.: _____

DATE: _____ PHONE # _____

APPLICANT'S NAME: _____

ADDRESS: _____

OWNER'S NAME & ADDRESS: _____
 (IF SAME AS APPLICANT WRITE SAME)

PROPERTY LOCATION: _____

BEING ON THE _____ SIDE OF _____
 (NORTH, SOUTH, EAST OR WEST) (STREET NAME)

BETWEEN _____ AND _____
 (STREET NAME) (STREET NAME)

PRESENT ZONING DISTRICT: _____ PROPOSED ZONING DISTRICT: _____

PRESENT USE OF PROPERTY: _____

PROPOSED USE OF PROPERTY: _____

PROPOSED AMENDMENT OF THE ZONING CODE TEXT: _____
 (IF APPLICABLE, IF NOT APPLICABLE WRITE N/A)

THE PROPERTY OWNER/APPLICANT MUST SUPPLY A LEGAL DESCRIPTION OF THE PROPERTY, AS RECORDED IN THE PICKAWAY COUNTY RECORDER'S OFFICE. LEGAL DESCRIPTION ATTACHED: YES _____ NO _____

A MAP, DRAWN TO SCALE SHOWING PROPERTY LINES, STREETS, EXISTING AND PROPOSED ZONING, AND SUCH OTHER ITEMS AS THE ZONING INSPECTOR MY REQUIRE, MUST BE SUPPLIED.

A SCALES PLOT PLAN MUST BE PROVIDED. PLOT PLAN ATTACHED: YES _____ NO _____

THE NAMES AND MAILING ADDRESSES OF ALL PROPERTY OWNERS WITHIN 200 FEET, CONTIGUOUS TO, AND DIRECTLY ACROSS THE STREET FROM THE PROPERTY, AS APPEARING ON THE PICKAWAY COUNTY AUDITOR'S CURRENT TAX LIST, IN THE PICKAWAY COUNTY COURT HOUSE, MUST BE PROVIDED IN LABEL FORM READY FOR MAILING. (THIS REQUIREMENT MAY BE WAIVED WHEN MORE THAN TEN (10) PARCELS ARE PROPOSED TO BE REZONED.

LIST OF ADJACENT PROPERTY OWNERS (WITHIN 200 FEET) ATTACHED: YES _____ NO _____

THE FOLLOWING STATEMENT INDICATES HOW THE PROPOSED AMENDMENT WILL IMPACT ADJACENTS AND PROXIMATE PROPERTIES:

BY SIGNATURE, I ATTEST TO THE TRUTH AND EXACTNESS OF ALL INFORMATION SUBMITTED.

DATE: _____ APPLICANT'S SIGNATURE: _____

DATE: _____ SIGNATURE OF OWNER: _____

APPLICATION ACCEPTED BY: _____ FEE: \$ _____

ONCE APPLICATION IS ACCEPTED AND PUBLIC HEARINGS ARE SET, THE ABOVE AMMENDMENTS TO THE ZONING CODE OR ZONING MAP MUST BE PASSED BY ORDINANCE OF VILLAGE COUNCIL.