



The City of

Alliance

"The Carnation City"

Ohio 44601-2415

504 E. Main Street

Dept. of Engineering, Building & Zoning

Phone: (330) 823-5122

Email: Eng.bld.zon@allianceoh.gov

ZONING CHANGE CHECKLIST

Project: _____ Date: _____

The following information **MUST** be included with all requests for Conditional Use submitted for review and processing in order to constitute a complete Conditional Use package. Incomplete applications will not be processed.

Complete Conditional Use Package Includes:

- ____ This completed form
- ____ Planning Commission Application
- ____ Application FOR Zoning Amendment
- ____ 2 Sets of Addressed, Stamped Envelopes for each parcel adjacent and across from site
- ____ 10 Copies of the Plat, 24"x36" or 18"x24"
- ____ 4 Reduced Copy of Plans 11"x17"
- ____ Electronic (PDF) Set of Plans

Please check the following items to ensure the plan has complied with the City of Alliance's Conditional Use Requirements. These are the minimum requirements. The applicant is responsible to provide any and all other information that is pertinent to the proposed Conditional Use change. All items must be checked unless an item is not applicable to this particular project; whereas, "N/A" should be written beside the box. Failure to include all applicable items will constitute an incomplete submittal.

Plan Requirements:

- The drawing must be appropriate for the detail of the plan. The scale must be either 1"=10',20',30',40',50',60' or 100'. A different drawing scale must be approved prior to submittal.
- Include a North arrow.
- Distinguish the area to be rezoned..
- State the proposed type of Zoning.
- Label the site's parcel number, City Lot or Outlot number, zoning category, owner's name, and acreage of site.
- Label adjacent and across from the site properties' parcel number, City Lot or Outlot numbers, zoning category, owner's names.
- Show the location of the parcel with respect to the intersection of two roadways (this may be done with a dimensional tie).

Include a boundary description of the area proposed to be rezoned.

The Engineering & Building Department will review the Conditional Use Request when it has been processed. If there are any comments, the applicant will receive the comments by fax and mail. Three copies of the revised plan must be submitted with a response letter addressing each comment. If a response letter is not received, the plan will not be reviewed. Ample time should be given to allow for review of the resubmittals. (*The week of Planning Commission is typically insufficient time to review the resubmittals prior to Planning Commission*).

Cost of publication to be paid by: _____

Name and address: _____

Does this zone change need to have an emergency clause? YES _____ NO _____

I do hereby attest that all above applicable items have been incorporated into the plan. I understand that failure to include all applicable items will constitute an incomplete submittal, which in turn will not be processed.

Signature of the Applicant

Date

CITY OF ALLIANCE
Application for Planning Commission Review

Submission Date: _____ **Date of Meeting:** _____

Type of Submittal (Check all that apply): _____ Site Plan; _____ Replat; _____ Alley/Vacation; _____ Variance(s);
_____ Preliminary Plat; _____ Final Plat; _____ Zoning Change; _____ Conditional Use; _____ Other (explain)

Project Name: _____

Location: _____

_____ Lot/ Parcel No.: _____

Owner's Name: _____

Address: _____

City, State & Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Professional contact Name (*Engineer, Surveyor, Architect, etc.*): _____

Professional Contact's Firm: _____

Address: _____

City, State & Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Primary Contact Name: _____

(The person the City should contact regarding the project.)

Address (if different than above): _____

City, State & Zip: _____

Phone: _____ Fax: _____ E-mail: _____

Planning Commission meets every 3rd Wednesday of each month. Submission deadline is the 20th of the month prior to the regularly scheduled meeting. Late applications will be scheduled for the next available meeting. All information listed on the application and applicable checklist must be submitted for the application to be complete. Incomplete applications will not be processed. An authorized representative must attend the Planning Commission for the project to be considered.

I do hereby attest that all statements, signatures, descriptions, and exhibits submitted with this application are true and accurate to the best of my knowledge and that I am authorized to file this application and act on behalf of the property owner.

Signature of the Applicant

Signature of the Property Owner, if not the applicant