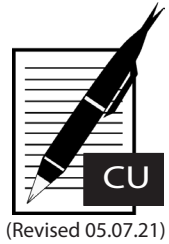




# Conditional Use Application

Page 1 of 4



Zoning Department  
Michele Boni, Development and Zoning Director  
Jeff Beard, Senior Zoning Officer

### Property Information

Site Address: \_\_\_\_\_

Parcel ID: _____	Zoning District: _____
Lot #: _____	Subdivision: _____

### Applicant Information

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone # _____	Fax # _____
---------------	-------------

Email: \_\_\_\_\_

### Applicant Signature

Applicant certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the zoning permit. Applicant agrees to be bound by all provisions of the zoning resolution of Orange Township, Delaware County, Ohio.

Date: \_\_\_\_\_ Applicant: \_\_\_\_\_

\_\_\_\_\_

Print

\_\_\_\_\_

Signature

### Property Owner Information Same as Applicant Info.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone # _____	Fax # _____
---------------	-------------

Email: \_\_\_\_\_

### Property Owner Signature Same as Applicant Info.

Applicant certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the zoning permit. Applicant agrees to be bound by all provisions of the zoning resolution of Orange Township, Delaware County, Ohio.

Date: \_\_\_\_\_ Property Owner: \_\_\_\_\_

\_\_\_\_\_

Print

\_\_\_\_\_

Signature

### Staff Use Only

Case # CU- \_\_\_\_\_

Date Filed: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

Check #: \_\_\_\_\_

Received By: \_\_\_\_\_

Hearing Date: \_\_\_\_\_

Technical Review: \_\_\_\_\_

### Checklist (10 Copies)

- Completed Application
- Fee Payment (check or money order only)
- Auditor's Map (11"x17" max.)
- Site Plan (Refer to Guide)

### Water & Wastewater

- Water Supply**
- Public (Central)
  - Private (On-site)
  - Other

- Wastewater Treatment**
- Public (Central)
  - Private (On-site)
  - Other

### Submittal Options

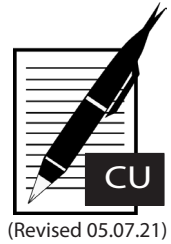
Drop Off: 1680 E. Orange Road  
Lewis Center, OH 43035

Mail In: 1680 E. Orange Road  
Lewis Center, OH 43035



# Conditional Use Application

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Zoning Department  
Michele Boni, Development and Zoning Director  
Jeff Beard, Senior Zoning Officer

Case# CU-

### Agent Information (If Applicable)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone #	Fax #
---------	-------

Email: \_\_\_\_\_

### Agent Signature (If Applicable)

Applicant certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the zoning permit. Applicant agrees to be bound by all provisions of the zoning resolution of Orange Township, Delaware County, Ohio.

Date: \_\_\_\_\_ Applicant: \_\_\_\_\_  
Print  
\_\_\_\_\_  
Signature

### Conditional Use(s) Requested:

Section: \_\_\_\_\_

Description: \_\_\_\_\_

Section: \_\_\_\_\_

Description: \_\_\_\_\_

Section: \_\_\_\_\_

Description: \_\_\_\_\_

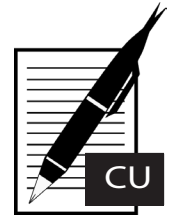
### Describe the project:





# Conditional Use Application

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(Revised 05.07.21)

Zoning Department  
Michele Boni, Development and Zoning Director  
Jeff Beard, Senior Zoning Officer

Case# CU-

5. The proposed use will not involve uses, activities, processes, materials, equipment, or conditions of operation that will be detrimental to any persons, property, or the general welfare by reason of excessive production of traffic, noise, smoke, fumes, glares or odors.

6. The proposed use will have vehicular approaches to the property which are so designed as not to create an interference with traffic on surrounding public thoroughfares

7. The proposed use will be consistent with the objectives of this Zoning Resolution and the Orange Township Comprehensive Plan

8. The proposed use will be in the interest of the public health, safety, and morals.

\* Please include any additional criteria as stated in said zoning district