



Village of Commercial Point

P.O. Box 56
Commercial Point, Ohio 43116
(614) 877-9248

Administrative Variance Request Application

Date Received: ___ / ___ / ___

Property Information

Street Address: _____

Zoning Classification: _____

Zoning Code Chapter Causing Variance Request: _____

Property Owner Information

Name: _____

Phone: _____

Address: _____

City / State / Zip: _____

Email: _____

Requested Variance:

The Undersigned hereby applies for a zoning certificate, to be issued on the basis of the representation contained herein, all of which the applicant swears to be true. The applicant further agrees to conform to all zoning regulations in force on the date of the application for the area represented.

Property Owner Signature: _____

Date: ___ / ___ / ___

Fee Paid: _____

Variance Request Application:

_____ Approve _____ Deny

_____ Approved with Conditions

Conditions (if applicable): _____

Zoning Administrator Signature: _____

Date: ___ / ___ / ___



Guidelines for Submission of Application

1. All completed applications must be filed with the Municipal Office prior to the start of any work or use requiring a variance.
3. See Chapter 1153.15 of the Commercial Point Zoning Code for the required submittals and other relevant information pertaining to obtaining a variance.
4. Approval of this application does not supersede any Home Owner Associations guidelines or requirements if applicable. It is the applicant's responsibility to contact the Home Owner Association for additional approvals if required.

Variance Fee

No fee required for an Administrative Variance Request.