



CITY OF TOLEDO
Department of Inspection
Division of Building Inspection

One Government Center, Suite 1600 • Toledo, OH 43604 • Phone (419) 245-1220 • Fax (419) 245-1329 • onestopshop@toledo.oh.gov

APPLICATION TO THE ADMINISTRATIVE BOARD OF ZONING APPEAL (BZA)

TMC Chapter 1112.0200

Site Location _____ Zoning District _____ Date _____

Legal Description _____

Applicant's Name (print) _____

Appeal. (Dept. of Inspection ruling – Title Nine Sign Code) _____ Hardship Variance _____ Exception _____ Appeal decision _____

TMC § _____

Applicant Signature _____ Phone _____

Applicant's Street Address _____ Fax _____

Applicant's City, State, Zip _____ E-Mail _____

<p>Applications must be accompanied with:</p> <ol style="list-style-type: none"> 1. 3 photos – showing different views of the site 2. Letter explaining your zoning request with full and accurate information. 3. Complete, clear site plan – recommended scale 1"=20' on 8-1/2" x 11" paper showing dimensions to all lot lines and the size of all structures on the premises. 4. Fee = \$150. Checks may be made payable to "City of Toledo." 	<p>Applicant: You should receive a written notice of the staff recommendation no later than Wednesday preceding the hearing date. Please call (419) 245-1220 if you do not receive this notice.</p>
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Return the application documents by mail to: Division of Building Inspection, One Government Center, Suite 1600, Toledo, OH 43604; or in person with the application documents and fee. Applications are due at least 30 days before the Board of Zoning Appeals' meeting to allow proper notification of neighbors. Meetings are typically held the third Monday of every month at 1:30 p.m. in City Council Chambers, One Government Center, Toledo, OH 43604. The applicant or the applicant's representative must be present.

***** OFFICE USE *****

Permit Tech Checklist: Application complete _____ Photos _____ Letter _____ Proper Site Plan _____ SWO _____

Copy Zoning Map _____ <http://local.live.com/> Transportation notified to check site distance hazard _____

Code Enforcement notified if orders are being appealed. _____ Permit Tech's Initials _____ Date _____

Reviewed by _____ Date _____ Staff Recommendation _____

Board Decision _____ Date _____