

VARIANCE PERMIT APPLICATION

Perkins Township Community Development Department
 2610 Columbus Avenue, Sandusky, OH 44870
 www.perkinstownship.com (419) 609-1435



| PROPERTY OWNER INFORMATION | | | APPLICANT TO PROVIDE 1. Non-refundable application fee of \$350.00, plus \$25 per each additional variance required (Fees may be paid by cash, check, or credit card (5% convenience fee). Checks should be made out to "Perkins Township"). 2. Two (2) copies of the application form and all supporting documents. 3. Supporting Documents: <ul style="list-style-type: none"> • Legal description of the property. • Site plan, including dimensions and setback distance(s) of all proposed structures or land uses. • Narrative explaining how the variance will affect the surrounding area. • "Letter of Authorization," if applicable. |
|--|----------------|---------------|--|
| OWNER NAME | | | |
| OWNER ADDRESS | | | |
| PHONE | EMAIL ADDRESS | | |
| APPLICANT INFORMATION Check if the same as above. | | | |
| APPLICANT NAME | | | |
| APPLICANT ADDRESS | | | |
| CITY, STATE, ZIP | | | |
| PHONE | | | |
| EMAIL ADDRESS | | | |
| PROPERTY/LOCATION INFORMATION | | | |
| PARCEL NUMBER | CURRENT ZONING | ACREAGE | |
| ADDRESS | SUBDIVISION | | |
| VARIANCE REQUESTED | | | |
| | | | |
| REASON FOR THE VARIANCE | | | |
| | | | |
| APPLICATION AUTHORIZATION | | | |
| **I hereby certify that I am the owner and/or applicant and all information contained in this application is true, accurate and complete to the best of my knowledge. All official correspondence in connection with the application should be sent to my attention at the address shown above. | | | |
| PRINT: Owner / Applicant | | DATE: | |
| SIGNATURE: Owner / Applicant | | | |
| Please note the following: (1) Applicants acting as an authorized agent of the property owner must also submit a signed and dated "Letter of Authorization" from the owner granting the applicant the authority to represent them, submit the application, and communicate on their behalf. | | | |
| STAFF REVIEW | | | |
| Submittal Date: <input type="radio"/> Walk In <input type="radio"/> Mailed <input type="radio"/> Emailed | | Processed By: | |
| Signature | Title | Date | |



**PERKINS TOWNSHIP
BOARD OF ZONING APPEALS
2025 MEETING SCHEDULE**

| DEADLINE FOR SUBMISSION 4:00 PM DEADLINE | | | | MEETING DATE 4:00 PM MEETING TIME | | | |
|---|-----------|----|------|--------------------------------------|-----------|----|------|
| Monday | December | 30 | 2024 | Tuesday | January | 21 | 2025 |
| Monday | January | 27 | 2025 | Tuesday | February | 18 | 2025 |
| Monday | February | 24 | 2025 | Tuesday | March | 18 | 2025 |
| Monday | March | 31 | 2025 | Monday | April | 21 | 2025 |
| Monday | April | 21 | 2025 | Monday | May | 12 | 2025 |
| Tuesday | May | 27 | 2025 | Monday | June | 16 | 2025 |
| Monday | June | 30 | 2025 | Monday | July | 21 | 2025 |
| Monday | July | 28 | 2025 | Monday | August | 18 | 2025 |
| Monday | August | 25 | 2025 | Monday | September | 15 | 2025 |
| Monday | September | 29 | 2025 | Monday | October | 20 | 2025 |
| Monday | October | 27 | 2025 | Monday | November | 17 | 2025 |
| Monday | November | 24 | 2025 | Monday | December | 15 | 2025 |
| Monday | December | 29 | 2025 | Tuesday | January | 20 | 2026 |

Notes:

- Applications are available in the Perkins Township Community Development Office or online at www.perkinstownship.com
- All application fees are non-refundable.
- All applications should be accompanied by 2 copies of the application and supporting documents.
- If you have any questions, please contact the Zoning Inspector at 419-609-1437.

**Perkins Township Community Development Office
Perkins Township Services Facility
2610 Columbus Avenue, Perkins Township, OH 44870**