Mantua Township Zoning Board of Adjustment Application of Appeal

Telephone Number: 443 Appeal Number: Date: Appeal is hereby made by the undersigned (check applicable item or items.) From the action of the Zoning Officer/Building Inspector in refusing my application For a Zoning Permit/Building Permit, dated for a special exception or variance from the terms of the Zoning Ordinance of Mantua Township, DEWINZAGES 14 Appellant: Name Owner: Name address Attorney: (if any) Name address Interest of appellant if not owner (agent, lessee, etc) 1. Application relates: (check applicable item or items) Use Lot Area Yards Height Existing building **Proposed Construction** Other 2. Brief description of real estate affected: Plate: 43, 03 Block: 031.03 Lot size: Present use: Present zoning classification

Present improvements upon land:

	Date determination made: 9 15 2000
	Your statement: Our lot is wregularly shaped.
	Action desired by appellant: Rear yard setback of 36'.
,.	REBSORS appellant heliaves Board should appears desired at the total
	Reasons appellant believes Board should approve desired action: (Refer to section or sections of ordinance under which it is felt that desired action might be allowed, and note whether hardship is or is not claimed, and the specific hardship.) Our lot is pregularly shaped. The
	or is not claimed, and the specific hardship.)
	or is not claimed, and the specific hardship.) Our lot is pregularly shaped. The Structure will help us utilize the
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	or is not claimed, and the specific hardship.) Our lot is pregularly shaped. The structure will help us utilize the outside space more efficiently. Has previous appeal been filed in connection with these premises?
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· ·	or is not claimed, and the specific hardship.) Our lot is pregularly shaped. The structure will help us utilize the outside space more efficiently. Has previous appeal been filed in connection with these premises?

My Commission Expires



AFFIDAVIT OF OWNERSHIP

MUST BE COMPLETED AND RETURNED

1. Name of Con	npany/Organization:	P. (1986)	-
2. Is Company	a Corporation?	Vo	
3. Name of Stat	e Which Incorporated: _	: /	
4. Is Company a	Partnership?		
OR PART) O	THE COMPANY/	TIDUALS WHO ARE OWNERS (FUI ORGANIZATION, AND IF A NO LIST ALL BOARD MEMBERS.	L N-
Name	Address	Title	
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Signature and Title		Please PRINT Name & Title	

