



**The Village of Doylestown**  
**Zoning Department**  
**24 South Portage Street**  
**Doylestown OH 44230**



**A VILLAGE WITH VALUES**

**A TOWN OF TRADITIONS**

**BOARD OF ZONING APPEALS**  
**APPLICATION FOR VARIANCE**

Application Number: \_\_\_\_\_ Date Received: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Location of Property \_\_\_\_\_  
 \_\_\_\_\_

Permanent Parcel Numbers: \_\_\_\_\_

Present Zoning: \_\_\_\_\_

Variance Requested: \_\_\_\_\_  
 \_\_\_\_\_

Justification for Variance: \_\_\_\_\_  
 \_\_\_\_\_

NOTE: This application must be accompanied by seven (7) copies of a site plan drawing showing the dimensions and boundaries of the property, the size and location of all existing and proposed buildings, the distances between buildings, the distances from buildings to lot line, and any natural or topographic features which are the basis for the request; and a non-refundable check in the amount of \$500.00.

The undersigned hereby certifies that all of the information contained in this application and the accompanying drawing are true and correct.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_