

**APPLICATION FOR ADMINISTRATIVE APPEAL  
BOARD OF ZONING APPEALS**

**FEE - \$225.00 - NON-REFUNDABLE  
TYPE OR PRINT - BLACK INK ONLY**

Pursuant to ORC 519.14 (A) and Sections 1001-7 (A), 1001-B, and 1001-9 of the Copley Township Zoning Resolution, the undersigned hereby appeals the decision of the Zoning Inspector or other Administrative Official with regard to:

1) Application for Zoning Certificate # \_\_\_\_\_ Date: \_\_\_\_\_

2) Action taken: \_\_\_\_\_ Date: \_\_\_\_\_

and requests a hearing date before the Board of Zoning Appeals of Copley Township.

3) Appellant's Name: \_\_\_\_\_

4) Agent of Appellant: \_\_\_\_\_

5) Address: \_\_\_\_\_

6) Owner of real property: \_\_\_\_\_

7) Address: \_\_\_\_\_

8) Street Address of Property Affected: \_\_\_\_\_

9) Zoned: \_\_\_\_\_

10) Intended Use: \_\_\_\_\_

11) Section(s) of Resolution upon which Appeal is taken: \_\_\_\_\_

12) Error of Administrative Official appealed: \_\_\_\_\_

\_\_\_\_\_

13) Interpretation of above Section(s) claimed: \_\_\_\_\_

\_\_\_\_\_

Signature of Appellant: \_\_\_\_\_ Date \_\_\_\_\_

Owner's Signature, if different from Applicant: \_\_\_\_\_

Required Attachments:

1) Application for Zoning Certificate Referenced

2) Notice of Decision or Action Appealed

**\*\*\*\* FOR TOWNSHIP USE \*\*\*\***

14) Certification of Completion of Application: \_\_\_\_\_

Date \_\_\_\_\_

15) Fee Received: \_\_\_\_\_ Date \_\_\_\_\_

16) Date Hearing Advertised: \_\_\_\_\_

Date Hearing Held: \_\_\_\_\_

Date of Board Action: \_\_\_\_\_

17) Action or Order of the Board: \_\_\_\_\_

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18) Notification of Board's Action to: \_\_\_\_\_

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

By: \_\_\_\_\_ Date \_\_\_\_\_

19) Signature of Official certifying items 14 thru 18: \_\_\_\_\_