WASHINGTON TOWNSHIP BOARD OF ZONING APPEALS

APPEAL, VARIANCE, SPECIAL PERMIT OR SPECIAL ZONING CERTIFICATE REQUEST

Name(s) of Person(s) Appealing Or Making the Request	
Address of Above Person(s)	
Name(s) of Owner(s) of the Subject Property, if Different From Above-Listed Person(s)	
Address of Owner(s)	
Description of Property involved (address—if any, frontage and depth in feet, acreage, etc./pleas deed and a drawing showing the property's lo	on which side of a particular street or roadway it is located, e attach a copy of a legal description such as would appear in a cation and dimensions):
If this is an APPEAL , describe the action of the township's administrative official which you appeal (such as the refusal of a zoning certificate or the issuance of a cease and desist order as to property usage):	
describe the zoning requirement as to which y	UEST FOR A SPECIAL PERMIT OR ZONING CERTIFICATE , ou desire a variance (such as a sideyard set-back requirement or a ment under which you request a special permit or special zoning
	ailing addresses of all persons and entities owning property roperty and all property across any streets that border it. If not Franklin County Courthouse.):
Names	Addresses
This Request is submitted as of	
Rebecca C. Princehorn Bricker & Eckler LLP 100 S. 3 rd Street	
Columbus, Ohio 43215	Signature(s) of Person(s) Appealing or making the Request

The foregoing form should be submitted with the appropriate filing fee (\$100.00) to the Secretary of the Washington Township Board of Zoning Appeals.