



# Sagamore Hills Township

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## APPLICATION FOR ZONING VARIANCE

(FEE - \$250)

ZONING APPLICATION NO.: \_\_\_\_\_ DATE FILED: \_\_\_\_\_

Applicant Name: DAN & MONICA JOHNSON

Applicant Address: 538 Orchard Grove Sagamore Hills

Applicant Phone No.: 216-280-1429

Property Owner Name: SAME

Property Owner Address: SAME

Property Owner Phone No.: SAME

Reason / explanation if applicant is not owner: N/A

Location of property for which a Zoning Variance is requested:  
(address, allotment name, lot number, etc.)  
538 Orchard Grove

Zoning Classification of property: residential

Description of variance requested and specific section of Zoning Resolution which applies:  
3.0 Residential District - 3.3 E  
Parcel 4501642

Include a sketch of property with boundaries, roads and structures shown with dimensions and attached to this application. The Sagamore Hills Township Board of Appeals maintains the right to request additional detail, to consider this request.

If the existing Zoning Resolution is providing practical difficulties or hardship to applicant or owner, what are they:

See Attached letter

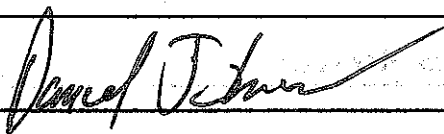
How will the granting of a Zoning Variance effect the immediate neighborhood and community in general:

significantly add value

List all contiguous property owners (name, address, city and zip code):  
(attach additional list if necessary)

See attached

Signature of Applicant:



Date:

7-24-2020

Printed Name:

Daniel Johnson

**FOR OFFICE USE ONLY**

Date / time received:

Fee / Check No.:

Date of hearing advertised:

Vote and decision of Zoning Board:

(including date of meeting if different from initial hearing date)