

BOSTON TOWNSHIP ZONING

1775 MAIN STREET PO BOX 123 PENINSULA, OH 44264 330-657-2601 Fax: 330-657-2396
www.bostontownship.org

-Business Corridor District Zoning Application

BZA File No: _____	Date Filed: _____	Filing Fee Paid: _____
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Applicant Data

Name: _____

Company Name: _____

Address: _____

Telephone No.: _____

Property Data

Zoning District: BUSINESS CORRIDOR DISTRICT (Chapter 7-Boston Township Zoning Resolution)

Corner Lot: ☐ Yes ☐ No Note: Corner lots are required to meet the front setback on both streets.

Property Address: _____ Parcel No. _____ (Attach copy of legal description)

Owner(s): _____

Owner Address: _____

Telephone No.: _____

If owner is not applicant, state relationship between owner and applicant: _____

Current Use:

Please provide a description of the current use of the property.

Permitted Use(s) List the specific sections of the Boston Township Zoning Resolution referencing the permitted use being sought and provide a detailed narrative description of the use:

Conditionally Permitted Use(s): Below list the specific section of the Zoning Resolution referencing the conditionally permitted use(s) being sought, if any, as well as a description of each use.

1. Section:_____ Description_____

2. Section_____ Description_____

3. Section_____ Description_____

4. Section_____ Description_____

Contiguous Property Owners List (name & tax mailing address)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____

Please provide a narrative statement evaluating the effects of the proposed use on adjoining property; the effect of such elements as noise, odor, fumes on adjoining property; a discussion of the general compatibility with adjacent and other properties in the district: (attach additional pages if needed)

Site/Structure Data

Setbacks (ft): Front _____ Sides _____ & _____ Rear _____ Lot area(acres) _____

Footprint area (sq.ft.) _____ Floors: _____ Gross floor area (sq.ft.) _____ Height(ft) _____

Area of proposed building(s): _____ Parking area required (sq.ft.) _____

Total impervious surface area (acres) _____ Total open space area (acres): _____

Percentage of lot impervious surface: _____ Percentage of lot open space: _____

Outdoor sign area proposed: _____ (Note-a separate Sign Application must be submitted.)

Storm Sewer ☐ Yes ☐ No If yes, a permit is required from Summit County

Sewer System ☐ Yes ☐ No A permit is required from the Ohio EPA

Data Required With Business Corridor Zoning Application

- Current completed Zoning Application
- Seven (7) copies of the completed site plan required per Chapter 8 of the Boston Township Zoning Resolution. The requirements of Section 803.05 must be complied with. The site plan will be reviewed pursuant to Section 805 of the Boston Township Zoning Resolution.
- Two(2) copies of the storm water management plans including calculations shall be submitted with the application. Approval of the storm water management plant by the Summit County Engineer is required prior to issuing a zoning certificate.
- Non refundable filing fee in the amount of _____
- Signed copy of the Applicant Certification signed by the Applicant and property owner.

Applicant Certification

By initialing, the applicant has read, understands, and agrees to the following:

_____ 1. Right of Revocation - It is understood and agreed by this applicant that any error, misstatement, misrepresentation of material fact, with or without intent, such as might and/or would cause a refusal of this application, or any material alteration in the accompanying plans made subsequent to the issuance of a Zoning Certificate without approval of the Zoning Inspector or Zoning Board of Appeals, shall constitute sufficient grounds for the revocation of such certificate.

_____ 2. The applicant agrees to allow the Zoning Inspector access to the property for on-site inspection(s).

_____ 3. On County Roads you are required to obtain a culvert permit from the Summit County Engineer's Office (330-643-2850).

_____ 4. On Boston Township Roads a charge will be made for a Road Entry Permit. Additionally a culvert permit fee deposit will be required to assure that roadway culverts are installed in accordance with township regulations and requirements. Contact Boston Township (330-657-2600) to obtain the necessary applications and documents.

_____ 5. The applicant agrees to abide by the Ohio Revised Code Sections 5589.08 , 5589.10, and 5589.22 in that no dirt or mud is permitted on the road right-of-way during construction and that any repair costs for damage to the roadway or parts thereof will be paid by the applicant

_____ 6. There may be deed restrictions on the property that differ from the Boston Township Zoning Regulations, Please check your deed to make sure that any proposed project meets any restrictions that may be in effect

_____ 7. The applicant agrees to abide by the Ohio Fire Code, Article 3(1301:7-7-03), Section F-30LO, and the appropriate section of the Ohio Revised Code pertaining to open burning. No open burning is permitted without first obtaining appropriate permits from the Ohio Environmental Protection Agency, Akron Office, and the Valley Fire District. The applicant also agrees to abide by Sections F-409.1 and F409.2.2 of the Ohio Fire Code pertaining to portable fire extinguishers during construction operations.

_____ 8. The zoning certificate shall become void at the expiration of one (1) year after date of issuance, unless the structure or alteration thereof is started, or within two (2) years after the date of issuance, unless the structure or alteration is completed.

_____ 9. Prior to the issuance of a zoning certificate for any permitted or conditionally permitted use listed in Chapter 7 of the Boston Township zoning resolution, a site plan shall be prepared, submitted for review, and acted upon, all as specified in Chapter 8 of the Boston Township zoning resolution.

_____ 10. **All tenants and/or occupants are required to obtain a business use certificate from the zoning office prior to occupancy.**

Applicant signature: _____ **Date:** _____

Land Owner signature: _____ **Date:** _____

Agent signature: _____ **Date:** _____

Fee (make check payable to Boston Township)