



Application for Zoning Appeal Process 1125.06

Application number: _____ Fee: \$150 plus cost of postage and advertising
Total fee to be determined: _____ Paid: check number: _____ Cash: _____
(Successful appeal results in \$50 refund)

1. Appellant's Name: _____ Phone: _____

Mailing Address: _____ City: _____

Email address: _____

Property address: _____ Johnstown, Ohio

2. Date of action of the Zoning Inspector that is dispute: ____/____/____

3. Nature of Zoning Inspector's action that is the dispute: _____

4. Explain how the appellant is personally affected by the action and how any harm was unique to the appellant and differs from, that suffered by the community at large:

5. Explain why the appellant believes the Zoning Inspector's interpretation is incorrect:

I certify the information contained in this two page application and attachments is true and accurate.

Applicant's signature: _____ Date: ____/____/____

App. received in office: ____/____/____ by: _____

Newspaper advertising dates: ____/____/____ and ____/____/____

Number of Contiguous property owners notified by certified letters: _____

P&Z meeting date for appeal: ____/____/____

Appeal approved by P&Z Commissioners on: ____/____/____ Appeal denied ____/____/____

Village of Johnstown P&Z chairperson: _____