

SYMMES TOWNSHIP ZONING COMMISSION
9323 UNION CEMETERY ROAD
LOVELAND, OH 45140-9386
PHONE: (513) 683-6644 FAX: (513) 683-6626

ZONE TEXT AND MAP AMENDMENT SUBMISSION REQUIREMENTS

CASE:

APPLICANT:

An application for a zone map amendment must comply with the requirements and procedures outlined herein.

PLEASE READ ALL INSTRUCTIONS

1. GENERAL REQUIREMENTS

___1.1 **Pre-Application Meeting** (Date: ___/___/___ Time: _____)

The applicant is to present a conceptual proposal to the Administrative Official and to obtain and discuss the overall application process before submitting an application (**Attachment 1**). Call 683-6644 for an appointment. The staff will present any adopted plans to the applicant for review. The Hamilton County Regional Planning Commission (RPC) by-laws for plan consistency will likewise be discussed. The applicant and/or his representative must be present. There will be no assurance at any time, implicit or otherwise, regarding final staff recommendations to the RPC about this application.

___1.2 **Symmes Township Zoning Commission Staff Review:** (Date: ___/___/___)

The applicant and/or his representative shall submit a conceptual rezoning request to the Administrative Official for review and analysis (this may be sent by messenger or mail). The RPC and Symmes Township Zoning Commission (STZC) staff will hold a staff meeting at which time the proposed reclassification will be reviewed for consistency with adopted plans. In the event that no plan has been adopted for the subject site/area, the staff will proceed with the review and discuss all relevant planning and zoning matters. At the conclusion of the meeting, a staff memo will be drafted and forwarded to the applicant. The memo is a preliminary review prior to the Pre-hearing Conference and prior to official application submittal of the rezoning and is subject to change and modification as additional information is received.

___ **1.2-1 Pre-hearing Conference:** (Date: ___/___/___ Time: _____)

The applicant and/or his representatives shall submit three (3) prints of a Sketch Plan of the proposal and a letter of intent describing the proposed use of the premises (Section 2.2 only one copy). The staff will schedule and conduct a Public Pre-hearing Conference in Symmes Township. It is the responsibility of the applicant and/or his representative to attend this Conference and present their proposal. The purpose of this requirement is to inform the Township Officials and local residents and to provide direction to the applicant.

___ **1.3 Submission Deadline:** (Date: ___/___/___) (RPC agenda in month of _____)

Application must be submitted to the office of the STZC according to schedule, (**Attachment 6**). Early submission is recommended to assure placement on the agenda and to provide adequate time for revisions and corrections.

___ **1.4 Revision Deadline:** (Date: ___/___/___)

Revisions and corrections in compliance with regulations and submission requirements must be completed at least **FOUR WEEKS PRIOR TO THE STZC MEETING**. Incomplete applications will not be accepted for processing or official filing nor placed on the agenda.

___ **1.5 Application Fee:**

An application for a zoning amendment shall be accompanied by a payment based upon the fee schedule in (**ATTACHMENT 7**) to cover the preponderance of cost of holding the public hearing thereon, including personnel costs, advertising and legal notices as required by law or otherwise in connection with said amendment. There shall be no refund or part thereof one public notice has been given. Review fees for Hamilton County Public Works and other professional or public agencies (if required) are the responsibility of the applicant. Make all checks payable to Symmes Township Board of Trustees.

2. WRITTEN REQUIREMENTS

___ **2.1 Metes and Bounds Description**

Submit IN DUPLICATE on a SINGLE 8"x11" paper the following information:

- ___ a. A metes and bounds description of the subject site;
- ___ b. The amount of area contained within the site;
- ___ c. A statement, signed by a registered surveyor, certifying that the description of the property proposed to be developed, is a complete, proper and legal description thereof.

___ **2.2 Application Letter**

Submit a letter completely describing the proposed rezoning of the premises. The following information shall be included:

- ___ a. Size of the area involved;
- ___ b. Description of proposed use (for land and buildings);
- ___ c. Character of development (architectural treatment, density, intensity);
- ___ d. Description of surrounding land uses
- ___ e. The specific changes in the character and conditions of the area that have occurred to make the property no longer suitable or appropriate for the existing zoning classification or to make the property appropriate for the proposed use;
- ___ f. The effect on; (1) community objectives and plans, (2) character of immediate vicinity, (3) adjacent property, and (4) public facilities and services; and the benefit that the neighborhood would derive from such change
- ___ g. Other information that the applicant feels is pertinent and would be helpful to the RPC, STZC or Symmes Township Board of Trustees in their review.

___ **2.3 Application Form**

Submit IN DUPLICATE a completed application form signed by the applicant and the owner(s) of the property. (**Attachment 1A& 1B**)

___ **2.4 Checklist of Requirements**

Submit IN DUPLICATE this completed form signed by applicant or representative. (See page 7)

3. GRAPHIC REQUIREMENTS

___ **3.1 Zoning Plat**

Submit **five (5) copies** of the zoning plat at a scale of one hundred (100) feet to inch or larger containing the following information:

- ___ a. All existing property lines and parcel numbers for each parcel within subject site and within three hundred (300) feet of exterior boundary of the subject tract, and the last name of the owners within two hundred (200) feet;
- ___ b. Metes and bounds and dimensions of subject property and area contained therein (in acres);
- ___ c. Existing zone district boundaries (shown in dashed lines with heavier line weight than property lines) and zone designations (for site and adjacent areas);

- ___ d. Project name in lower right corner, scale and North point (North shall be to top of zoning plat);
- ___ e. Area of proposed rezoning indicated by crosshatching or shading;
- ___ f. Street names and right-of-way lines with line weight heavier than property lines;
- ___ g. Distance from subject property to nearest street intersection and/or section corner;
- ___ h. Proposed zone district lines shall extend to the centerline of all dedicated streets; and
- ___ i. Surveyor's stamp or seal.

___ 3.2 **Proposed Development Plan\Existing Conditions Site Plan**

A proposed development plan is required and a separate existing features plan is preferred. However, the existing conditions can be included on the proposed development plan if delineated with lighter line weights, screening or use of other techniques to differentiate existing from proposed features. An architect's, engineer's or surveyor's stamp is permitted for the development plan submission. However, only a surveyor's stamp is accepted for the submission of the zoning compliance plan and for acquiring a zoning certificate.

___ 3.21 **Proposed Features:** Submit **five (5)** copies of the plan (a single drawing) at a scale of fifty (50) feet to the inch or larger (unless otherwise approved by the Director) showing the items listed below.

- ___ a. name of project, date, scale, north arrow (with north to top of plan), map title, total number of sheets and sheet number;
- ___ b. name and title of applicant, present owner(s) and person preparing map;
- ___ c. vicinity map that identifies the site with references to surrounding areas and to existing street locations;
- ___ d. zone (gross) area of entire site; site (net) area excluding right-of-way;
- ___ e. summary table with the following information:
 - ___ proposed use of all facilities
 - ___ floor area including basements (if nonresidential)
 - ___ number of dwelling units (if residential)
 - ___ parking spaces required by Zoning Res.; parking spaces provided
 - ___ seating capacity (where appropriate)
 - ___ density of residential uses (divide number of dwelling units by net site area – excluding right-of-way and access easements)
- ___ f. perimeter boundary of subject site (excluding proposed right-of-way);
- ___ g. metes and bounds and dimensions of requested zonechange area;
- ___ h. the general location and use of all proposed structures on the subject site including buildings, recreation facilities, parking

- facilities, trash stations, dumpster, fences, sewage treatment plant, walls, sidewalks, curbs, heating/a.c. and exhaust equipment, etc.;
- ___ i. location and dimensions of future building additions and phases of implementation if contemplated;
 - ___ j. location and dimensions of proposed off-street parking area layout (indicate spaces per bay). Show individual parking spaces, loading areas, aisles, traffic patterns, driveways for ingress and egress, and type of pavement;
 - ___ k. specify front, side and rear yard setbacks of structures and parking areas (indicate if at variance with the Zoning Resolution);
 - ___ l. generalized location of anticipated earthwork distinguishing cut from fill;
 - ___ m. location and dimensions of proposed streetscape buffer, boundary buffer and interior parking lot landscaping (see attachment 3);
 - ___ n. construction limits (area to remain undisturbed); location of existing trees or tree masses that will remain and their appropriate diameter (if over 6 inches) or form of canopies;
 - ___ o. location, dimensions, and number (including heights and sq. ft.) of all signs; location and general type of exterior lighting (including height, cut-off angle)
- Note:* *Contact the County Engineer, Permit Section for items p, q, r & s*
- ___ p. location, width, and type of pavement for proposed streets, length of cul-de-sacs, and location of all access points adequately described to enable field location (i.e. exact distance from centerline of nearest street intersection or other fixed feature in closer proximity);
 - ___ q. location and details of proposed traffic improvements such as acceleration and deceleration lanes, channelization, etc.;
 - ___ r. location and dimensions of right-of-way, easements and all lands to be dedicate to the county or reserved for specific uses;
 - ___ s. typical sections of all right-of-way;
- Note:* *Contact the Hamilton County Public Works Department for item t*
- ___ t. location of proposed retention and detention basins and storm water management concept (see attachment 4).

___ **3.22 Existing Features:** Submit **five (5)** copies of the plan at a scale of fifty (50) feet to the inch or larger (unless approved by the Director) showing items listed below. Each of the required features listed below must be shown for a minimum distance of two hundred (200) feet beyond the entire development tract (zone change area).

- ___ a. existing property lines, right-of-way and utility easements for the entire tract and each parcel involved;
- ___ b. location of existing zone boundaries and up to two hundred (200) feet outside subject site;
- ___ c. existing contour lines (dashed) at ten (10) feet intervals or less on site and including two hundred (200) feet beyond (use two (2) foot intervals where necessary to determine storm drainage). Indicate sources and date of data;

- ___ d. existing steep slope areas of 20% (5:1); (steep slopes of 20% and greater include all areas where the horizontal distance between 10-foot contour intervals is equal to or less than fifty (50) feet);
- ___ e. location of landslide prone soils and bedrock (indicate source);
- ___ f. existing mature trees or tree mass (all trees over 6" diameter);
- ___ g. location of watercourses and areas subject to 50 year flood and 100 year flood (indicate source);
- ___ h. the use and approximate location of existing structures, pavements, sanitary and storm sewers, sidewalks and curbs, and other physical and natural features (indicate structures to be demolished in dashed lines).

___ **3.3 Preliminary Grading Plan**

The applicant is **required** to submit five (5) copies of a preliminary grading plan identifying proposed contour lines at 2-ft intervals. The contour lines shall be extended to the adjacent property lines and/or right-of-way.

___ **3.4 Plan-Color/Presentation Copy**

The applicant is **required** to submit a colored proposed development plan **one week prior** to the Symmes Township Zoning Commission meeting. The colored proposed development plan shall not be mounted and cannot be smaller than 24"x 36". This proposed development plan will be kept as part of the official file.

___ **3.5 Plan Reduction**

___ Submit **five (5)** copies of the plan reduced to 8 ½" x 11". The reduction need not include any area outside the property lines of the subject site.

___ **3.6 Architectural Graphics** (upon request)

- ___ Elevation
- ___ Cross-section
- ___ Typical floor plans

4 CONCEPT REVIEW*

___ **4.1 Review of Preliminary Sewer Concept**

The Township Zoning Inspector will transmit drawings to M.S.D. (Metropolitan Sewer District) and/or O.E.P.A (Ohio Environmental Protection Agency) for concept approval (request for sewer availability).

___ **4.2 Review of Preliminary Access / Circulation Concept**

The Township Zoning Inspector will transmit drawings to the County Engineer and/or ODOT for review and recommendation.

____ **4.3 Review of Preliminary Fire Prevention Concept**

The Township Zoning Inspector will transmit drawings to the Township Fire Prevention Officer for review and recommendations.

____ **4.4 Review of Preliminary Landscape, Buffer and Conservation Concepts**

The Township Zoning Inspector will transmit drawings to the Hamilton County Soil Conservation Service and the Regional Planning Commission Staff for review and recommendations.

____ **4.5 Review of Conformance to Thoroughfare Plan, Zoning Resolution and Land Use Plan & Policies**

The Township Zoning Inspector will transmit drawings to the Regional Planning Commission and Township Officials for review and recommendations.

____ **4.6 Review of Storm Water Detention/Retention (See attachment 4)**

The Township Zoning Inspector will transmit drawing to the Hamilton County Public Works for review. The applicant must fill out a SDS form before Public Works will review the proposed development (call Public Works at 946-4550).

____ **4.7 Hillside Trust**

The Township Zoning Inspector will transmit drawings to The Hillside Trust for any projects that may impact steep slopes.

NOTE:

Information submitted shall be assumed to be correct and applicant and/or agent shall assume responsibility for any errors and/or inaccuracies resulting in an improper application.

Person preparing Checklist (applicant or representative)

Date Submitted

* See attachments 2 and 5 for additional information and agency addresses.

ZONING AMENDMENT MEETING/HEARING PROCESS & SUBMISSION REQUIREMENTS

___ **A. Regional Planning Commission**

The Regional Planning Commission will conduct a public meeting the 1st Thursday of the month at 12:30 p.m. to make a recommendation to the Symmes Township Zoning Commission. The Regional Planning Commission bases their recommendation on consistency with an adopted land use plan, existing land uses and/or new information concerning adjacent land uses or other developments.

___ **B Symmes Township Zoning Commission**

The Symmes Township Zoning Commission will conduct a public hearing on the 3rd Wednesday of the month at 6:30 p.m. to make a recommendation to the Symmes Township Trustees. The Symmes Township Zoning Commission takes into consideration the Regional Planning Commission's recommendation and reviews the proposed development to determine compliance with the zoning resolution.

___ **C Township Trustees**

The Township Trustees will conduct a public hearing to review the proposed amendment. The Trustees will close the public hearing and vote to approve, deny or modify the amendment at the next scheduled meeting.

___ **D Referendum Period**

Within 30 days of the Township Trustees final decision, the public has the opportunity to challenge the decision by subjecting it to a vote of the public. The opponents must acquire signatures of 8% of the registered voters who voted in the most recent gubernatorial election in the affected township to have the issue put on the next election ballot. A zoning certificate cannot be acquired until the 30 day referendum period has expired or until the results of the election on the zone amendment are certified by the Board of Elections.

An application for a zoning amendment which subsequently fails to receive the approval of the Township Trustees or is subsequently defeated through referendum, shall not again be filed for the purpose of amending the zoning of all or part of the same property within a period of twelve (12) months from the date of the Trustee's action or date of such referendum, unless such an amendment for change shall be more restrictive than last applied for.

___ **E Final Development Plan**

Following the approval of a zone amendment the applicant must submit a Final Development Plan that meets all the conditions placed on the development by the Township Trustees. *A packet containing the Final Development Plan Submission Requirements will be provided.* The Final Development Plan must be approved by the Symmes Township Zoning Commission.

The total amendment process requires a minimum of approximately five (5) months to complete.

Attachment 1A

APPLICATION FOR **ZONING AMENDMENT**
SYMMES TOWNSHIP ZONING COMMISSION
9323 UNION CEMETERY ROAD
SYMMES TOWNSHIP, OHIO 45140-9386
PHONE: (513) 683-6644 FAX: 683-6626

This application must be typewritten or printed. Use additional sheets if necessary.

Has this proposed Zoning Amendment been discussed with the Symmes Township Zoning Inspector? _____ Date: _____ Staff? _____ Date: _____

Request Change from _____ to _____ Total area _____ acres.

Name of Applicant _____

Address _____ Phone No. _____

Name, Address & Parcel Number of each property owner of record within the area proposed to be reclassified.

1. _____
2. _____
3. _____
4. _____

Location of property in accordance with County Auditor Records: Tract Size: _____

Auditor's Book _____ Page _____ Parcel(s) _____

Physical location of property _____

(MY) (OUR) interest in the property proposed to be reclassified is as:

Owner _____ Agent _____ Lessee _____ Optionee _____

Applicant _____
Signature Address Phone No.

Owner _____
Signature Address Phone No.

A filing fee shall accompany the completed application. (See Attachment 7)
Make check payable to: Symmes Township Zoning Commission

THERE SHALL BE NO REFUND OR PART THEREOF ONCE PUBLIC NOTICE HAS BEEN GIVEN.

Note: Although the Applicant may not be the same as the owner(s), the owner(s) shall co-sign as applicants for an amendment.

Attachment 1B

**SYMMES TOWNSHIP ZONING COMMISSION
9323 UNION CEMETERY ROAD
SYMMES TOWNSHIP, OHIO 45140-9386
PHONE: (513) 683-6644 FAX: 683-6626**

COMPLETE ITEMS 1 THRU 4 AND ALL OTHER
APPLICABLE SPACES ON THIS FORM.

	NAME	STREET ADDRESS	CITY	STATE	ZIP CODE	PHONE NO.
(1) APPLICANT						
(2) OWNER						
(3) PLANS BY						
(4) BILLING TO						
(5) CONTRACTOR						
(6) DEVELOPER						
(7) ATTORNEY						

Attachment 2

ADDRESSES OF COUNTY DEPARTMENTS AND AGENCIES

HAMILTON CO. AUDITOR
138 E. Court St., Room 304
Cincinnati, OH 45202
(513) 946-4000

HAMILTON CO. ENGINEER
138 E. Court St., Room 700
Cincinnati, OH 45202
(513) 946-4250

HAMILTON CO.
PLANNING & DEVELOPMENT
DEPT. OF BUILDING COMMISSIONER
138 E. Court St., Room 801
Cincinnati, OH 45202
(513) 946-4550

HAMILTON CO.
PLANNING & DEVELOPMENT
DEPT. OF PUBLIC WORKS
138 E. Court St., Room 801
Cincinnati, OH 45202
(513) 946-4550

HAMILTON CO.
PLANNING & DEVELOPMENT
REGIONAL PLANNING COMMISSION
138 E. Court St., Room 801
Cincinnati, OH 45202
(513) 946-4550

HAMILTON CO.
PLANNING & DEVELOPMENT
RURAL ZONING COMMISSION
138 E. Court St., Room 801
Cincinnati, OH 45202
(513) 946-4550

METROPOLITAN SEWER DISTRICT
1600 Gest St.
Cincinnati, OH 45204
(513) 352-4850

HAMILTON CO. BOARD OF HEALTH
250 William Howard Taft
2nd Floor
Cincinnati, OH 45219
(513) 946-7800

HAMILTON CO. SOIL & WATER
CONSERVATION DISTRICT
22 Triangle Park Dr.,
Cincinnati, OH 45246
(513) 772-7645 Ext. 23

ODOT (OHIO DEPARTMENT OF
TRANSPORTATION)
505 South Street, Rt. 741
Lebanon, Ohio 45036-9518
1(800) 831-2142

LOVELAND SYMMES FIRE DEPARTMENT
9425 Loveland-Madeira Road
Cincinnati, Ohio 45242
513-792-7330 ext 12

PARKING/LANDSCAPING CALCULATION SHEET

Show requested information as part of your revised submission for completeness:

	REQUIRED	PROPOSED
PARKING:		
<u>No. of parking spaces</u>		
(Sec. 141/Show calculation)	-----	-----
<u>Interior Landscaping</u>		
(Sec. 145/ Indicate location if located within Streetscape buffer)		
Square footage (22 sq. ft. per parking space)	-----	-----
No. of canopy trees	-----	-----
No. of shrubs	-----	-----
LANDSCAPING:		
<i>Sec. 326/Delineate each required buffer area on map.</i>		
<u>Streetscape Buffer:</u>		
Width	-----	-----
No. of Canopy trees	-----	-----
No. of Shrubs	-----	-----
<u>Boundary Buffer:</u>		
Width	-----	-----
No. of Canopy trees	-----	-----
No. of Shrubs	-----	-----

Note:

Refer to Sec. 328.3 and indicate in calculations if requesting Zoning Commission approval of alternative planting in buffer yard areas.

Attachment 4 (Public Works Filing Requirements)



Storm Water Drainage System Application
 SDS Review & Inspection for Hamilton County Planning & Development
 138 East Court Street RM 801 - Cincinnati, Ohio 45202
 Phone 513-946-4550
 Fax 513-946-4744

1. Applicant to complete ALL applicable spaces on this form.

Date:

Identification	Name	Street Address	City	State	Zip	Phone
Owner or Developer:	<input type="text"/>					
Contractor:	<input type="text"/>					
Plans By:	<input type="text"/>					
Person Billed for Review Fees:	<input type="text"/>					
Person Billed for Inspection Fees:	<input type="text"/>					

2. Project Information:

Project Title: Application/Case No. Present Zoning:
 A unique name to identify your project

Project Address: Township: Proposed Zoning:

3. Check Applicable Box:

Type of Project	Concept Review	Improvement Plan* Review	Concurrent Concept & Improvement Plan* Review
Subdivision:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Frontage Subdivision:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Commercial/Industrial:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Building Permit:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Improvement plans are detailed construction drawings conforming to Rules & Regulations of Public Works.

4. The owner of the development and undersigned do hereby covenant and agree to comply with all the laws of the State of Ohio and the regulations of the County of Hamilton pertaining to storm water management, and that said construction will be in accordance with plans and specifications submitted herewith and certify that the information and statement given on this application are true.

5. **Person Billed for Review Fees:** Signature _____
 Same as Above Print Your Name & Company name

6. **Person Billed for Inspection Fees:** Signature _____
 Same as Above Print Your Name & Company name

Attachment 5

WHERE TO OBTAIN INFORMATION AND MAPS RELEVANT TO LAND DEVELOPMENT

SOIL CONSERVATION DISTRICT	REGIONAL PLANNING	RURAL ZONING	METROPOLITAN SEWER DISTRICT	SANITARY ENGINEER	COUNTY ENGINEER	BUILDING COMMISSIONER	COUNTY AUDITOR	DEPARTMENT, AGENCY	GENERAL INFORMATION
							●	Plat Description, Land Ownership, Real Estate Valuation, Taxation	
	●	●						Zoning	
	●	●						Subdivision	
				●				Storm Sewer and Drainage	
			●					Sanitary Sewer	
					●			Rights-of-way, Road Improvements, Driveways, Sidewalks, Bridges, Road Records	
						●		Building Codes, Building Inspection, Heating, Air Conditioning	
	●							Land Use, Growth Plans, School Districts, Census	
●	●							Soils	
	●							Property Lines: 1" = 200' Property Lines: 1" = 400'	MAPS
	●							Overall County Street Pattern 1" = 3000'	
					●			Topography and Tree Cover 1" = 200'	
	●							Topography and Tree Cover 1" = 400'	
	●							Topography Overall County 1" = 3000', 1" – 2000'	

Attachment 6

**Hamilton County Regional Planning Commission & Symmes Township Zoning Commission
SCHEDULE OF MEETINGS AND SUBMISSION DEADLINES*
FOR ZONING AMENDMENTS and SPECIFIC PLANNED UNIT DEVELOPMENTS
2015-2016**

CYCLE	<u>Submission Deadlines</u>		<u>Public Meetings</u>	
	For All Zoning Amendment Applications (1)	For Revisions to Prelim Dev. Plans/ Complete Application (2)	RPC Regular Meeting	STZC Regular Meeting (3)
	6 weeks before RPC Meeting	3 weeks before RPC Meeting	First Thursday	Third Wednesday
2015-01	<u>November 20</u>	<u>December 11</u>	<u>January 8</u>	January 21
15-02	<u>December 24</u>	January 15	February 5	February 18
15-03	January 22	February 12	March 5	March 18
15-04	February 19	March 12	April 2	April 15
15-05	March 26	April 16	May 7	May 20
15-06	April 23	May 14	June 4	June 17
15-07	May 21	June 11	July 2	July 15
15-08	June 25	July 16	August 6	August 19
15-09	July 23	August 13	September 3	September 16
15-10	August 20	September 10	October 1	October 21
15-11	September 24	October 15	November 5	November 18
15-12	October 22	November 12	December 3	December 16
2016-01	<u>November 25</u>	December 17	January 7	January 20, 2016
2016-02	<u>December 24</u>	January 14	February 4	February 17

NOTE:

(1) This is the application deadline for initial staff review. A staff/public conference will be scheduled and held in the township prior to full submission. (See application form Sec. 1.3)

(2) This is the official filing date for completed applications. (See application form Sec. 1.4)

(3) All TZC public hearings will be held in the Township Administration Building on the third Wednesday of each month. After the TZC makes its recommendation, the Board of Township Trustees will also schedule a public hearing which will be held in the Township Administration Building.

Underlined dates differ from normal schedule.

* See application form for additional explanation.

Attachment 7

FEE SCHEDULE
ZONING MAP AMENDMENTS

ZONE DISTRICTS	FEE
RESIDENTIAL	
Zoning Map Amendments - Single Family Districts	\$1,500.00
Zoning Map Amendments - Multiple Family Districts	\$1,500.00 plus \$450.00 per acre (\$13,200.00 cap)
NON-RESIDENTIAL	
Zoning Map Amendments	\$1,500.00 plus \$450.00 per acre

Calculate gross property acreage using whole numbers:

- A. .1 to .4 acres – round down (i.e. 2.4 acres = 2 acres)
- B. .5 to .9 acres – round up (i.e. 2.5 acres = 3 acres)

Gross acreage: _____ Calculating acreage: _____

_____ x \$450 = _____ + \$1,500 = _____
 Calculating acreage Amendment fee due

1. Make checks payable to Symmes Township.
2. Fees do not include the cost of legal advertisement.
3. Amendment processing fees are nonrefundable.
4. Approved by the Board of Symmes Township Trustees: December 2014
5. Effective Date: January 1, 2015

APPLICATION DATE: _____ RECEIVED: _____ COMPLETE: _____

FEE PAID BY CHECK # _____

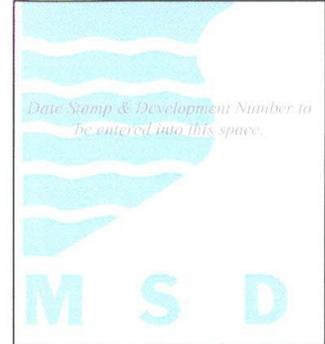
Attachment 8 (MSD Filing Requirements)

Mr. Thomas H. Schwiars, P.E.
Principal Engineer
Metropolitan Sewer District of Greater Cincinnati
1600 Gest Street
Cincinnati, Ohio 45204

Dear Mr. Schwiars:

I hereby request determination of availability of sewer service for the development on the lands as described herebelow.

LANDS OF THE DEVELOPMENT: # & Street Address _____ Municipality or Township _____ Auditor's Parcel Numbers: Book & Page _____ Parcel Numbers _____ _____
--



Describe the current use of the lands of the development: _____ _____ _____

DESCRIPTION OF THE PROPOSED DEVELOPMENT

For Residential Development
<input type="checkbox"/> Single Family Residences; # of units: _____ <input type="checkbox"/> Condominiums; Enter # of units: _____ <input type="checkbox"/> Apartments; Enter # of units of each size: # 1-BR _____ # 2 BR _____ # 3 BR _____ (or larger)

For Commercial/Industrial Development
<input type="checkbox"/> Office Building; Enter Gross Number of Sq-ft : _____ <input type="checkbox"/> Retail, other than restaurant Enter retail activities _____ Enter sq-ft of retail space _____ <input type="checkbox"/> Restaurants & Food Service Operations Enter # of restaurant seats _____ <input type="checkbox"/> School; <input type="checkbox"/> Elementary <input type="checkbox"/> Middle <input type="checkbox"/> High School or above Number of students _____ Number of staff _____ <input type="checkbox"/> Medical Building; Number of Doctors _____ Daily number of patients _____ <input type="checkbox"/> Industrial <input type="checkbox"/> Other _____ ENTER THE TOTAL NUMBER OF EMPLOYEES THAT WILL BE WORKING AT THIS LOCATION: _____

I hereby certify that I am (check one) the owner the developer Engineer or architect representing the owner Contractor under contract with the owner or developer plumber who is a licensed tapper under contract with the owner or developer other _____, and that all information provided hereabove is accurate to the best of my knowledge.

Signed _____ Date ___/___/___

Tel/FAX. Numbers _____

Print Name _____

Address to which letter of availability shall be sent _____