

NON-CONFORMING USE CERTIFICATE APPLICATION**COLERAIN TOWNSHIP
ZONING COMMISSION**

CERTIFICATE NUMBER: _____

4200 SPRINGDALE ROAD
CINCINNATI, OHIO 45251
PH: (513) 385-7505 FAX: 245-6503*Complete all parts in ink – please print***PROPERTY IDENTIFICATION**

STREET ADDRESS _____

BOOK _____ 510 _____ PAGE _____ PARCEL NUMBER _____

APPLICANT _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

OWNER _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PRIOR CERTIFICATE

HAS A PRIOR NON-CONFORMING USE CERTIFICATE BEEN ISSUED? YES _____ NO _____

DATE ISSUED _____ CERTIFICATE NUMBER _____

WHAT DATE DID THIS USE ORIGINATE? _____

IS SUFFICIENT RECORD AVAILABLE TO VALIDATE THE ABOVE? YES _____ NO _____ IF SO, PLEASE ATTACH.

DESCRIPTION OF NON-CONFORMING USE

(PLEASE SUBMIT TWO (2) COPIES OF THE SITE PLAN SHOWING THE FOLLOWING)

NATURE OF USE _____

NUMBER OF STRUCTURES _____ AVAILABLE PARKING YES _____ NO _____

SIGNAGE YES _____ NO _____ # _____ LOCATION _____

OTHER _____

The above-described condition is not in conformance with the Zoning Resolution for the unincorporated territory of Colerain Township, Hamilton County, Ohio. Such non-conformity is permitted within Article 11 if such non-conformity does, in all other respects conform to the Resolutions of Colerain Township and the laws of the State of Ohio.

SIGNATURE OF APPLICANT _____

DATE _____

SIGNATURE OF OWNER _____

DATE _____

DO NOT WRITE BELOW THIS LINE

PRESENT ZONING CLASSIFICATION _____

ZONING CLASSIFICATION REQUIRED FOR THIS NON-CONFORMING USE _____

ZONING ADMINISTRATOR _____

DATE _____