Application for Conditional Use Permit Scioto Township, Delaware County, State of Ohio

To the Scioto Township Board of Zoning Appeals:

The undersigned hereby applies for a Conditional Use Permit for the following use, to be issued on the basis of the representations contained herein, all of which applicant says are true:

1.	Address or location	on of the property:_		
2.	Current Zoning Di	strict of property:		<u>.</u>
3.	Name of landowner:			
	Telephone:			<u>.</u>
4.	Occupant or lesse	ee (if other than landowner):	
5.	Total Acreage:			
6.	A sketch of the lot showing existing buildings and proposed construction or use for which this application is made must accompany this application.			
6.	Description of Co	nditional Use reques	sted	: (attach additional sheets as necessary)
7.	Please include an	y other information	whi	ch is relevant to your request:
8.	The non-refundab	le application fee of	\$50	00.00 must accompany this application.
		<u>.</u>		
Applica	ant Signature	Date		
				Applicants printed name, address, & phone number
Receiv	ed and Accepted by:			
Zoning Inspector		Date		