

Status: _____

Zoning Certificate # _____

Date: _____

Date this application filed: _____

Notice of Hearing: _____

Advertised on: _____

Notices mailed to: _____

Signed X _____

Applicant

DECISION

Application or appealed: _____

(Granted/denied)

With the terms of the following Resolution: _____

Date: _____

X _____
Chairman of the Ohio Twp. Board of Zoning Appeals

X _____
Secretary of the Ohio Twp. Board of Zoning Appeals