



**CITY OF COSHOCTON PLANNING COMMISSION  
REQUEST FOR ZONING CHANGE**

Request Number \_\_\_\_\_ Date Request Filed \_\_\_\_\_

Zoning District \_\_\_\_\_ Date of Hearing \_\_\_\_\_

The property under consideration is located at \_\_\_\_\_

I am requesting permission to \_\_\_\_\_

**\* A legal description of the property must be attached to application**

**\*\* You may be required to provide supporting documentation such as architectural plans and engineer drawings**

Application fee is \$75.00 due at the time of submittal. You will be invoiced for the legal ad and postage. All fees must be paid before the date of the hearing.

Owner/Representative Signature \_\_\_\_\_

Owner \_\_\_\_\_ Lessee \_\_\_\_\_ Holder of Option \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\*\*\*\*\*

Date Appeal Filed \_\_\_\_\_ Date of Hearing \_\_\_\_\_

Zoning District \_\_\_\_\_ Date of Legal Ad \_\_\_\_\_

Application Fee Received \_\_\_\_\_ Date \_\_\_\_\_

Legal Ad/Postage Fee Received \_\_\_\_\_ Date \_\_\_\_\_

2<sup>nd</sup> Legal Ad Fee Received \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_  
Planning Commission Clerk

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**Planning Commission**

**Member Signature**

**Vote**

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**Request Granted** \_\_\_\_\_

**Request Denied** \_\_\_\_\_

**Reason for denial (to be completed by Board President)**

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\_\_\_\_\_  
President

\_\_\_\_\_  
Safety Service Director