

FORM NO. 1-A

APPLICATION FOR AN AGRICULTURAL USE EXEMPTION

MONTVILLE TOWNSHIP

The undersigned hereby applies for an agricultural use exemption to the Montville Township Zoning Resolution, said exemption to be issued by the township zoning inspector on the basis of the information contained within this application.

THIS APPLICATION SHALL BE COMPLETED BY THE APPLICANT (OWNER OF RECORD OR DESIGNATED LEGAL REPRESENTATIVE) AND NOTARIZED.

- A. Name of Applicant: _____
Address of Applicant: _____
Property Address (if different from above): _____
Permanent Parcel Number: _____
Telephone Number of Applicant: _____
Fax Number of Applicant: _____
E-mail Address of Applicant: _____

- B. Zoning district in which lot is located: _____

- C. Attach a copy of the deed of record for the lot.

- D. The lot is within a platted and recorded subdivision or within an area of fifteen (15) or more contiguous recorded lots approved by the County Planning Commission:
_____ Yes or _____ No.

- E. Attach a site plan showing the location(s) of any proposed building(s) and structure(s) with setbacks to the lot lines; and describe, in detail, the proposed agricultural use and any incidental building(s) and structure(s) including their size (in square feet):

The undersigned hereby certifies that all of the information supplied in this application and any attachments thereto are true and correct to the best of my knowledge, information, and belief. I hereby acknowledge that I understand that the penalty for falsification is imprisonment for not more than six (6) months, or a fine of not more than one thousand dollars (\$1,000), or both. Furthermore, the undersigned hereby acknowledges that should the agricultural use cease and not be replaced with another agricultural use, any building(s) and structure(s) incidental thereto must be in compliance with the zoning regulations for the affected zoning district and a zoning certificate shall be obtained.

In witness whereof, the undersigned hereunto set his/her/their hand(s) this _____ day of _____, 20 ____.

By (owner or legal representative)

Witness

Print Name

Print Name

State of Ohio

County of _____

Before me, a notary public in and for said county and state personally appeared _____ who acknowledged that he/she/they did sign the foregoing instrument and that the same is his/her/their free act and deed for the purposes therein expressed, in witness whereof, I have hereunto set my hand and affixed my official seal at _____, _____, this _____ day of _____, 20 ____.

Notary Public

Seal

FOR OFFICIAL USE ONLY

Application number: _____

Date completed application received: _____

The proposed use and any building(s) and structure(s) incidental thereto are classified as agricultural pursuant to the _____ Township Zoning Resolution and no zoning certificate is required.

Signature of Township Zoning Inspector

Print Name: _____

Date

Notes: _____

