



# *City of Seven Hills, Ohio*

## *Building Department*

### ZONING BOARD OF APPEALS

#### Chapter 939

The Board shall hear and decide all questions brought before it by appeal from the refusal, granting or revocation of permits by the Commissioner of Buildings under the provisions of this Zoning Code or of any section of the building Code. It shall also hear and decide all matters referred to it or upon which it is required to pass under this Zoning Code. Within its powers the Board may reverse or affirm, wholly or in part, or may modify the order, requirement, decision or determination appealed from and shall make such order, requirement, decision or determination as in its opinion ought to be made under the circumstances and to that end shall have all the powers of the officer from whom the appeal is taken and it may issue or direct the issuance of a permit.

Where there are **practical difficulties** in the way of carrying out the strict letter of the provisions of this Zoning Code, the Board of Appeals shall have the power in a specific case to vary the application of any such provision in the harmony with the general purpose and intent of this Zoning Code so that the public health, safety, morals and general welfare may be secured and substantial justice done.

Instructions for applying for an Appeal:

1. Complete the application for appeal.
2. Submit application and application fee 14 days prior to scheduled meeting.
3. Make checks payable to City of Seven Hills for Application Fees:  
\$150.00 for commercial projects  
\$75.00 for residential projects.

Council shall have the power to approve, amend, modify or reverse any decision of the Board of Zoning Appeals if Council finds that the decision of the Board is contrary to the purpose and intent of the zoning ordinances. Such review by Council shall be made within ninety days.



# *City of Seven Hills, Ohio*

## *Building Department*

### **ZONING BOARD OF APPEALS**

#### Instructions

1. State address or permanent parcel number for which Variance is being requested.
2. Type or print full name of person presenting application.
3. List complete mailing address and telephone number and email of person presenting application.
4. Type or print full name of person, firm, corporation or partnership seeking to be heard by the Board of Appeals.
5. List mailing address and telephone number and email of person, firm, corporation or partnership. If mailing address to which notice of meeting is to be sent is different, please include addresses.
6. If an attorney will represent you, indicate his or her name, address and telephone number.
7. Twelve (12) drawings or plans should be included with request to clarify matters and to avoid misunderstandings.
8. State in your own words all pertinent information involved in this matter. If your information is not complete, it may be necessary for the Board of Appeals to request additional information before this matter can be set on its agenda.
9. Bring to this hearing any documents, drawings, photos, or other materials or evidence along with your testimony to help demonstrate your need for the variance.
10. Indicate action you are requesting the Board of Appeals to take. For example:  
"The Board of Appeals is requested to grant a Variance in this instance because of the practical difficulty which now prevails."

**THIS APPLICATION MUST BE SIGNED AND DATED BY THE APPLICANT.**

Upon receipt of a valid request, the Board will in due course notify the applicant as to the date upon which it will hear the matter requested or such other action as it will take regarding the matter.

No matter will be heard by the Board unless a proper application has been submitted.

One copy of the completed application is to be submitted along with the fee.

Our mailing address is:     City of Seven Hills  
  Building Department  
  7325 Summitview Drive  
  Seven Hills, Ohio 44131

Make check payable to the City of Seven Hills. Residential Fee - \$75.00  
Commercial Fee - \$150.00



# City of Seven Hills, Ohio

## Building Department

### APPLICATION FOR ZONING BOARD OF APPEALS REQUEST FOR HEARING

Type or Print application (attach separate sheets if necessary)

Meeting Date: \_\_\_\_\_

1. \_\_\_\_\_  
Permanent Parcel Number                      Address of Variance Location
  
2. \_\_\_\_\_  
Lot Size                      Square Feet                      Property Owner
  
3. \_\_\_\_\_  
Name of Applicant/Attorney/Agent                      Email Address
  
4. \_\_\_\_\_  
Street Address of Applicant
  
5. \_\_\_\_\_  
City                      State                      Zip Code                      Phone
  
6. \_\_\_\_\_  
Code Section                      Code Requirements
  
7. Explain how would the literal application of the provisions of the code result in practical difficulty peculiar to the property involved and not based on conditions created by the owner:  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_
  
8. What are the topographical or geographical conditions or circumstances of the property involved which prevents compliance with the code?  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_
  
9. Explain why the variance will not be materially detrimental to the public health, safety, and general welfare, or injurious to the adjacent property owners.  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_