

**CITY OF OREGON, OHIO** – BUILDING AND ZONING INSPECTION DEPARTMENT  
5330 SEAMAN ROAD, OREGON, OH 43616 / PHONE (419) 698-7071 / FAX (419) 698-7150

**FEES DUE AS LISTED:**

1-5 acres      \$200.00  
6-20 acres     \$300.00  
21 or greater   \$400.00

Date: \_\_\_\_\_  
Case No.: \_\_\_\_\_  
Receipt No.: \_\_\_\_\_  
Fees Paid: \_\_\_\_\_

### Application for Zoning Change

TO:    The Oregon City Council  
       The Oregon Planning Commission

I or we, the undersigned, owner(s) of the following described property, do hereby request your Honorable Body to consider a change in the zoning classification for said property or properties listed below:

#### LEGAL DESCRIPTION

PARCEL NO.: \_\_\_\_\_ AUDITOR MAP NO.: \_\_\_\_\_

Description: \_\_\_\_\_

Frontage: \_\_\_\_\_ Depth: \_\_\_\_\_ Area: \_\_\_\_\_

Street Address of Property: \_\_\_\_\_

**Change of Zoning Classification Requested:** From: \_\_\_\_\_ To: \_\_\_\_\_

Owner's Signature(s)    Address:

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### Planning Commission Recommendation to Council

After a public hearing as required by law, it is the recommendation of the Oregon Planning Commission that this application be \_\_\_\_\_.  
(granted – denied)

Voted:      Yeas: \_\_\_\_\_ Nays: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Condition(s), if any:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PERMITS ARE NOT TRANSFERABLE OR REFUNDABLE**