

**CITY OF SPRINGDALE, OHIO  
SPRINGDALE BUILDING DEPARTMENT  
11700 SPRINGFIELD PIKE – SPRINGDALE, OHIO 45246  
TELEPHONE: (513) 346-5730  
FAX: (513) 346-5747**

**SUBMISSION REQUIREMENTS AND INSTRUCTIONS FOR  
CONDITIONAL USE PERMIT**

An application for Final PUD/Transition District Development Plan approval submitted to the Office of the City of Springdale Building Department must comply with the requirements and procedures outlined herein.

This packet contains a checklist of general, written and graphic requirements and the application submittal forms, which explain the Development Plan process. The checklist, together with all required information and application forms, must be submitted (originals) in complete and accurate form before the amendment will be processed by the Building Department.

The filing date of the application packet shall be the date on which all information submitted is examined by the Building Department and found to meet all the requirements as described in this packet. The schedule below lists the closing dates for the filing of applications and corresponding hearing dates for each cycle. The closing date represents the final day on which an application will be accepted. **After the closing date, the applicant cannot modify any portion of the information submitted unless specifically requested by the staff, Planning Commission or City Council. Early submission is therefore highly recommended to assure placement on the agenda and adequate time for revisions and corrections.**

**2008 CLOSING DATES AND SCHEDULES OF MEETINGS**

<u>DUE DATE</u>	<u>PLANNING COMMISSION</u>
January 14, 2008	February 12, 2008
February 11, 2008	March 11, 2008
March 10, 2008	April 8, 2008
April 14, 2008	May 13, 2008
May 12, 2008	June 10, 2008
June 9, 2008	July 8, 2008
July 14, 2008	August 12, 2008
August 11, 2008	September 9, 2008
September 15, 2008	October 14, 2008
October 13, 2008	November 11, 2008
November 10, 2008	December 9, 2008

**NOTE: THE APPLICANT OR A REPRESENTATIVE WILL BE EXPECTED TO BE IN ATTENDANCE ON THE SCHEDULED MEETING DATE AT 7:00 P.M. IN THE CITY COUNCIL CHAMBERS AT THIS ADDRESS UNLESS ADVISED OTHERWISE BY THE BUILDING DEPARTMENT**

**SUBMISSION REQUIREMENTS  
FOR CONDITIONAL USE PERMITS TO THE  
CITY OF SPRINGDALE ZONING CODE**

FOR CITY OF SPRINGDALE BUILDING DEPARTMENT USE ONLY:

CASE # \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

**1. GENERAL REQUIREMENTS**

\_\_\_ 1.1 SUBMISSION CLOSING DATE (DATE: \_\_\_/\_\_\_/\_\_\_)

The application packet must be submitted to the office of the City of Springdale Building Department in person, no later than the due date. Prior to submitting the application packet and necessary information, the applicant should revise the proposed plans and/or information as advised by the Building Official. After the closing date, the applicant cannot modify any portion of the information submitted unless specifically requested by the staff or Planning Commission. Early submission is recommended to assure placement on the agenda and adequate time for revisions and corrections. **Incomplete or inaccurate applications will not be accepted for processing or be placed on the agenda for any hearings or meetings.**

\_\_\_ 1.2 APPLICATION FEE (\$200.00 - MAKE CHECK PAYABLE TO CITY OF SPRINGDALE)

An application for a Conditional Use Permit shall be accompanied by an application fee to cover the costs of holding the public hearing thereon, including personnel costs, advertising and legal notices as required by law or otherwise in connection with said amendment.

Application cancellations must be submitted in writing to the Building Official. **There shall be no refund or part thereof once public notice has been given.**

**2. WRITTEN REQUIREMENTS**

\_\_\_ 2.1 CONDITIONAL USE APPLICATION FORM

Complete and submit the original and one (1) copy of the Conditional Use Application form (provided).

\_\_\_ 2.2 OWNERS AFFIDAVIT

Complete and submit the original and one (1) copy of the Affidavit (provided).

\_\_\_ 2.3 DESCRIPTION OF REQUEST AND REASONS FOR CONDITIONAL USE

Complete and submit the original and one (1) copy of the Description of Request and Reasons for Conditional Use form (provided in this packet).

\_\_\_ 2.4 CHECKLIST OF REQUIREMENTS

**Submit this checklist fully completed.**

**3. GRAPHIC REQUIREMENTS**

\_\_\_ 3.1 PLOT PLAN (if applicable)

Drawn to scale; the finished size not larger than 24 x 36 inches, containing the following information:

- \_\_\_ A. All existing property lines and parcel numbers for each parcel within the subject site and all property within and contiguous to and directly across the street from the exterior boundary of the subject tract, and the last name of the owners therein;
- \_\_\_ B. The exact boundaries and dimensions of the subject lot **(this should be by actual survey unless waived by the Building Official)**;
- \_\_\_ C. Existing property lines and zone district boundaries (shown in dashed lines with heavier line weight than property lines) and zone designations for the subject property and surrounding properties within 200 feet of the subject property;
- \_\_\_ D. Title, scale and north point (north shall be at the top of the plat);
- \_\_\_ E. The size and location of all existing and proposed structures;
- \_\_\_ F. The existing and proposed use of the entire lot and all structures;
- \_\_\_ G. Street names and right-of-way lines with line weight heavier than property lines;
- \_\_\_ H. Distance from subject property to nearest street intersection and/or section corner; and
- \_\_\_ I. Stamp or seal and signature of registered engineer or surveyor in the State of Ohio **(unless waived by the Building Official)**.

\_\_\_ 3.2 REDUCED PLOT PLAN

Plot plan reduced to an 11" x 17" sheet of paper. The information contained on the reduced version of the plan shall be the same as which is required above.

\_\_\_ 3.3 NUMBER OF COPIES OF DEVELOPMENT PLANS

The applicant shall submit six (6) copies of the Development Plan and one (1) Reduced Development Plan for City Staff review. After initial review by City Staff, the applicant shall submit six (6) copies of the Development Plan and ten (10) Reduced Development Plans for final review and distribution to Planning Commissioners on or before the date advised by the Building Official.

INFORMATION SUBMITTED SHALL BE ASSUMED TO BE CORRECT AND APPLICANT AND/OR AGENT SHALL ASSUME RESPONSIBILITY FOR ANY ERRORS AND/OR INACCURACIES IN AN IMPROPER APPLICATION.

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Signature of person preparing this checklist  
(Applicant or Representative)

Date Submitted

**APPLICATION FOR A CONDITIONAL USE PERMIT  
CITY OF SPRINGDALE BUILDING DEPARTMENT  
11700 SPRINGFIELD PIKE SPRINGDALE, OHIO 45246  
TELEPHONE: (513) 346-5730**

FOR CITY OF SPRINGDALE BUILDING DEPARTMENT USE ONLY:

CASE # \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_

FEE RECEIPT # \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

NOTE: THIS APPLICATION MUST BE TYPEWRITTEN OR NEATLY PRINTED – USE  
ADDITIONAL SHEETS IF NECESSARY

NAME OF APPLICANT \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NO. \_\_\_\_\_

CITY/STATE/ZIP \_\_\_\_\_

NAME, ADDRESS & AUDITOR'S PARCEL ID NUMBER OF EACH PROPERTY OWNER  
OF RECORD WITHIN THE PROPERTY WHICH IS REQUESTED FOR CONDITIONAL  
USE REQUEST:

1. \_\_\_\_\_

2. \_\_\_\_\_

BRIEFLY DESCRIBE REQUEST \_\_\_\_\_

EXISTING ZONING OF THE SUBJECT PROPERTY: \_\_\_\_\_

(MY) (OUR) INTEREST IN THE SUBJECT PROPERTY IS:

OWNER \_\_\_\_\_ AGENT \_\_\_\_\_ LESSEE \_\_\_\_\_ OPTIONEE \_\_\_\_\_

APPLICANT \_\_\_\_\_

Signature

Address

Phone

Fax

OWNER(S) \_\_\_\_\_

Signature

Address

Phone Number

**OWNER'S AFFIDAVIT**

STATE OF OHIO, COUNTY OF HAMILTON

I (we) \_\_\_\_\_  
hereby certify that we are all of the owners of the real estate which is the subject of the Conditional Use Permit Application; that we hereby consent to the Planning Commission of the City of Springdale acting on my/or application for the subject real estate. We understand that our application will be considered and processed in accordance with the regulations as set forth by the City of Springdale Building Department and Zoning Code; that we agree to accept, fulfill and abide by those regulations and all stipulations and conditions attached to the property by the Planning Commission of the City of Springdale. The statements and attached exhibits are in all respects true and correct to the best of my/our knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City and State

\_\_\_\_\_  
Phone

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_

\_\_\_\_\_  
Notary Public

Person to be contacted for details, other than signatory:

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

