TOWNSHIP

APPLICATION FOR REZONING OR OTHER AMENDMENT OF THE ZONING ORDINANCE
(EXCLUDING PUD)

An application to request the rezoning of property or a zoning and text amendment must be heard before the Ada Township Planning Commission. *Regular meetings of the Planning Commission are held on the third Thursday of each month at 7:00 p.m. at Ada Township Hall.* After receipt of the application and payment of the fee, your request will be placed on the next Planning Commission meeting agenda for the purpose of scheduling a public hearing. The hearing will be scheduled for the next month's Planning Commission meeting for consideration, with all legal notifications being met.

Recommendations from the Planning Commission are considered by the Ada Township Board of Trustees at the first available Ada Township Board of Trustees meeting following the regular Planning Commission meeting.

A non-refundable filing fee of $300.00 made payable to Ada Township must accompany your application as well as a small-scale map of the property and an accurate legal description of the property. Please note that a $1,000.00 escrow deposit may be required, at the discretion of Township officials and staff.

Applicant Information:

Name: _____

Address: _____

Phone Number: _____ Email: _____

Property Owner Name and Address *(if different than above)*: _____

_____

Property Information for a Rezoning Request:

Property Address: _____

Parcel Number: 41-__ __ - __ __ - __ __ __ - __ __ __

Current Zone District Classification: _____

Proposed Zone District Classification: _____

For a Zoning Ordinance Text Amendment Request:

The following general amendment is requested to be made to the Zoning Ordinance:

_____

_____

_____

For All Requests:

Attach a written statement that addresses the conformity of the request with the Township Master Plan.

I (we), the undersigned, do herby make application and petition the Township to amend the Ada Township Zoning Ordinance and associated zoning map, if applicable, and also herby grant permission to Ada Township and its officials and staff to enter upon the subject property for purposes of review and evaluation of this request.

Applicant's Signature(s): _____ Date: _____

Property Owner's Signature(s): _____ Date: _____
(If different than above)

TO BE COMPLETED BY ADA TOWNSHIP

Application Received: _____ Initial: _____
                        mm / dd / yy

Application Fee of $ _____ Received: _____ Initial: _____ Check # _____
                                             mm / dd / yy

Escrow Deposit of $ _____ Received: _____ Initial: _____ Check # _____
                                             mm / dd / yy

Updated 10/22/18