

**Zoning Commission**  
**Board of Zoning Appeals**  
**Property Owner Form**



Planning & Zoning Department  
8540 Kenwood Road  
Sycamore Township, Ohio 45236  
Phone: (513) 792-7250  
[www.sycamoretownship.org](http://www.sycamoretownship.org)

**PROJECT ADDRESS:** \_\_\_\_\_ **ZIP CODE:** \_\_\_\_\_

**APPLICANT NAME:** \_\_\_\_\_

OWNER NAME	STREET ADDRESS	ZIP	TAX MAILING STREET ADDRESS	ZIP

OWNER EMAIL	OWNER PHONE NUMBER

***The owner of this project address and undersigned do hereby certify*** awareness that an applicant is applying for a Zoning Commission Case or a Board of Zoning Appeals Case. The owner of the real property agrees to grant Sycamore Township access to the property for review and inspection related to this Zoning Commission/ Board of Zoning Appeals application. By signing, the owner of this project is aware that there shall be no refund or part thereof once Zoning Commission or Board of Zoning Appeals public notice has been given.

\_\_\_\_\_  
PROPERTY OWNER'S SIGNATURE

\_\_\_\_\_  
DATE