

APPLICATION FOR CONDITIONAL USE PERMIT
BOARD OF ZONING APPEALS, LICKING TOWNSHIP, OHIO

In accordance with the provisions of the Zoning Resolution of Licking Township, Licking County, Ohio, I hereby apply to the Licking Township Board of Zoning Appeals for a Conditional Use Permit of the Zoning Resolution, Licking County, Ohio, applicable to the subject property.

(Please print or type all information)

Application No. _____

Name of Applicant PERFORMANCE TRAINING SOLUTIONS
Mailing Address 10077 JACKSONTOWN RD THORNVILLE, OH 43076
Phone Number: Home 740-404-5206 Business 614-863-8830

Name of Property Owner SMZ DEVELOPMENT COMPANY LLC.
Mailing Address P.O. BOX 1270 ZANESVILLE, OH 43702-1270
Phone Number: Home 740-624-1188 Business 740-452-1880

1. Location Description:
Address of Property 10077 JACKSONTOWN RD THORNVILLE, OH 43076
Subdivision Name 02600 MIDDLE PART
Section _____ Township Licking Lot No. 9-10

(If not in a platted subdivision attach a legal description of the area)

2. Existing zoning designation of the subject property: SECTION 12.02 INTERSTATE BUSINESS

3. Existing use of the subject property: OFFICE SPACE, CELL TOWER, READY-MIX CONCRETE PLANT

4. Description of the proposed use of the subject property:
Adult Vocational School Training to include but not limited to Crane, Heavy Equipment, CDL, and Classroom Education

5. This Conditional Use Permit application involves the following specifications/conditions of the Licking Township Zoning Resolution: page(s) 6-11 Section(s): 4.01.A.3.a to 4.01.A.3.i

6. Justification of Conditional Use Permit: In order for a Conditional Use Permit to be granted, the applicant **must prove** to the Board of Zoning Appeals that the following items are true. Please address the following questions on a separate page, in a typed letter format. Your comments will be the basis for your request of applying for a variance.

- A. That special conditions and circumstances exist which are peculiar to the land, structure or buildings in the same district.
- B. That a literal interpretation of the provisions of this resolution would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of this resolution.
- C. That special conditions and circumstances do not result from actions of the applicant.
- D. That granting the Conditional Use Permit requested would not confer on the applicant by special privilege that is denied by this resolution to other lands, structures or buildings in the same district.

E. Owner's consent to application or satisfactory evidence showing applicants legal or equitable interest in property.

8. Attachments and additional information required:

- A. Plans in triplicate and drawn to scale, preferably 8 ½ inches by 11 inches but no larger than 11 inches by 17 inches, must accompany this application showing dimensions and shape of lot, the size and locations of existing buildings, the locations and dimensions of proposed or alterations, and any natural or topographic peculiarities of the subject property.
- B. Provide a list of all adjoining property owners with their complete names and mailing addresses in accordance with the Licking County Auditor's current tax list on mailing labels either in a typed format or in legible handwriting. This includes adjoining property owners on all four sides, including across road right-of-ways. PLEASE NOTE: Failure to accurately list all adjoining property owners will result in return of the Conditional Use Permit application for completion.
- C. A copy of the tax map showing adjoining property owners and the specific location of the subject property within Licking Township. This is available at the Licking County Engineer's Office.
- D. Plans in triplicate of proposed site for conditional use showing the location of all buildings, parking and loading areas, traffic access and traffic circulation, open spaces, landscaping, refuse and service areas, utilities, signs, yards and such other information as the Board may require to determine if the proposed conditional use meets the intent and requirements of this resolution.
- E. A narrative statement evaluating the effects on adjoining property, the effect of such elements as noise, glare, odor, fumes and vibration of adjoining property, a discussion of general compatibility with adjacent and other properties in the district and the relationship of the proposed use to the comprehensive plan.

9. Submittal of this application does not imply nor guarantee approval by the Licking Township Board of Zoning Appeals. Approval or denial of any application is at the sole discretion of the Licking Township Board of Zoning Appeals. It is recommended that a representative for the applicant be present at the scheduled public hearing.

I certify that the information contained in this application and its supplements is true and correct.



Applicant Signature

6/01/23
Date

APPLICATION FOR CONDITIONAL USE PERMIT

List all adjoining property owners with their complete names and mailing addresses. This includes adjoining property owners on all four sides, including across road right-of-ways.

PLEASE NOTE: Failure to accurately list all adjoining property owners may result in denial of the variance.

1. Harless Taylor D & Piatt Haley N Harless Travis N
10019 Jacksontown Rd Thornville, OH 43076
2. Barton Evan (Jacksontown Rd 041-119502-00)
7877 Kindle Rd. Thornville, OH 43076
3. Edwards Joann H (LE) & Edwards Jeffrey A
10050 Jacksontown Rd. Newark, OH 43055
4. Trickle Laura A & Steven K
7587 Kindle Rd. Thornville, OH 43076
5. _____

6. _____

7. _____

8. _____

When complete mail all documents with the Conditional Use Permit Fee of \$600.00 (make checks payable to Licking Township Trustees) to:

Andrea Lynch, Licking Township Zoning Clerk
8332 Licking Trails Rd.
Thornville, OH 43076
Resident: 740-323-2400