

City of Huron
Planning and Zoning Department
417 Main St. Huron, Ohio 44839
P: 419-433-5000
F: 419-433-5120



RE-ZONING PROCEDURE
OUTLINE AND APPLICATION
Codified Ordinance Section 1131.03

When a completed application is received by the Zoning Department for a re-zoning within the City of Huron, the City Council will be notified at their next regularly scheduled meeting. City Council shall refer the matter to the Planning Commission for their review, consideration, and recommendation to the City Council. The Planning Commission shall be given at least thirty (30) days to report their findings and recommendation on the matter back to the City Council. The City Council shall then schedule a Public Hearing on the matter for their final decision and action on the application.

The following schedule and time table shall serve as a guideline:

1. Completed application, data, and fee received by the Zoning Department
2. A notification is submitted to the City Council at their next regularly scheduled meeting.
3. Notifications are sent out to the parties of interest as required in Section 1131.03 of the Codified Ordinances at least twenty (20) days before the Planning Commission considers the matter.
4. Planning Commission consideration and recommendation to the City Council (at least thirty (30) days from their (Planning Commission's receipt of the application).
5. Report and recommendation to the City Council at their (City Council's) next regularly scheduled meeting
6. City Council Public Hearing (at least thirty (30) days from their receipt of Planning Commission's recommendation)
7. City Council's final action on the request.

CITY OF HURON
APPLICATION TO RE-DISTRICT PROPERTY
(Type or Print)

Date Received: _____

Location: _____

Legal Description of Subject Property:

Property Owner: _____

Address: _____

Applicant: (Name & Address - if different from the property owner)

Current Zoning District of Subject Property: R-1 R-2 R-3

B-1 B-2 B-3

I-1 I-2

Other: _____

Proposed Zoning District of Subject Property:

R-1 R-2 R-3 B-1 B-2 B-3

I-1 I-2

Other: _____

**CITY OF HURON
RE-DISTRICT APPLICATION**

Is the applicant represented by legal counsel? Yes No

If Yes, Counsel's Name and Address: _____

Counsel's Contact Number: (_____) - _____

Property Location

Was a re-zoning request ever submitted for this property? Yes No

If Yes, give date: _____

Owner or Authorized Representative: _____

The following information must be attached to this application:

1. A map of the subject property. (Maximum size-11" x 17")
2. A map of the subject property in relation to the adjoining properties.
(Maximum size-11" x 17")
3. A complete list of the names and current address of all properties owners within 150' of the exterior boundaries of the subject property.
4. A letter, signed by the owner of the property, requesting the re-zoning, designating the current zoning district and the proposed zoning district.
5. A \$250.00 filing fee drafted to the City of Huron. (Section 1321.12 (c))

DO NOT WRITE BELOW THIS LINE

Date Completed Application Received: _____

Zoning Department Representative: _____

Date Submitted to City Council: _____

Date Submitted to Planning Commission: _____