## APPLICATION FOR APPOINTMENT TO THE DEERFIELD TOWNSHIP BOARD OF ZONING APPEALS OR ZONING COMMISSION



Name:	
Mailing Address:	
Home Phone:	
Mobile Phone:	
Work Phone:	
Email:	
Preferred Contact Method:	
The <b>Zoning Commission</b> is comprised of five regular members and one alternate member. The Commission's responsibilities include initiating text and map amendments to the Zoning Reso-lu as needed and making recommendations to the Board of Trustees on amendments and planned unit development projects. The Commission meets the second Monday of the month and each member receives a \$50.00 stipend at the end of the year for each meeting they at-tend.	
The <b>Board of Zoning Appeals</b> is comprised of five regular members and one alternate member. Board's responsibilities include hearing the following types of cases: appeals of the decision of the Zoning Inspector; variances of the requirements of the Zoning Resolution; con-ditional use requequestions regarding nonconforming uses; and revocation of permits. The Board meets the secon Thursday of the month and each member receives a \$50.00 sti-pend at the end of the year for each meeting they attend.	he ests; nd
For which board would you like to be considered?  Zoning Commission Board of Zoning Appeals  How many years have you resided in Deerfield?  Continued on Page 2	

ZC / BZA Application Page 2
In what community activities have you been involved (i.e. school, recreation, church, local government)?
What education, vocational, or practical experience do you posses that may be relevant to yo service on this Board?
Why do you wish to be appointed to this position?
Please list three references (name and phone number)

By providing your signature below you acknowledge that the information provided is accurate.

Please submit the application to the Community Development Department by email at shill@deerfieldtwp.com, by fax at 513.701.6983, or by mail or in person at Deerfield Township, 4900 Parkway Drive, Suite 150, Mason, Ohio 45040