

## PROCEDURES TO APPLY TO PLANNING COMMISSION

1. Please fill out the attached application request for Planning Commission Review. Or provide a letter addressed to the Elyria Planning Commission stating what is being requested.
2. Please provide 16 complete sets; application, drawings, photos, etc.; **4 full original sets** (Engineering, Community Development, Fire, Building), and **12 copied sets** to the Planning Commission Secretary **no later than 15 days** prior to the scheduled Planning Commission Meeting.

Elyria Planning Commission Meetings are scheduled the first Tuesday of each month at 11:00 at Elyria City Hall, 131 Court St., Elyria, Ohio 44035.

3. If a Variance or Conditional Use Permit is being asked for, please provide names, addresses and parcel numbers of the adjacent and adjoining property owners of the property and a public notice will be mailed out to those property owners.
4. If a Re-Zoning request is made, please provide the required legal description, or survey of the area, including size in square footage or acreage, include locations of the areas as to City Streets, and numbers or distances from an indicated intersections, etc. A complete list of the specific requirements can be located in the Elyria Codified Ordinance, Section 1133.03 and is available upon request.
5. A \$100.00 Variance fee is required – made payable to the City of Elyria.
6. A \$500 fee is required to apply for a Conditional Use Permit and a Re-Zoning request.
7. There is NO fee to request a Waiver to the Design Review Guidelines or for Planning Commission Review.  
(A list of other fees are listed on the application)
8. Please provide photographs of the property to show how the Variance, if granted, will affect adjacent properties. Three or four photos of the affected area of construction are sufficient. (Front, rear, sides).
9. If needed, the Planning Commission Secretary will send out a Legal Notice for the Public Hearing to be published in the Chronicle Telegram 14 days prior to the scheduled meeting.

If you have any questions, please contact Planning Commission Secretary,

Mary Tomski at 440-326-1472.

Thank you.

APPLICATION REQUEST FOR ELYRIA PLANNING COMMISSION  
REVIEW APPROVAL OF PROJECT

**The following must be available with your application when submitting a request to Planning Commission:**

1. Submit a fully completed application request with signatures of applicant and property owner. (Property owner’s signature not needed if already signed on the Design Review application.) To: Planning Commission Secretary, City of Elyria Building Department, 131 Court St., Elyria, Ohio 44035, 440-326-1472.
2. Submit 16 copies of renderings which include: scaled proposed site plan and picture of existing site or building, color copy of all elevations and/or signage proposed, materials used, height, dimensions, color, landscaping, and lighting.
3. If possible, submit one (1) copy of attachment(s) electronically to Planning Commission secretary: [mtomski@cityofelyria.org](mailto:mtomski@cityofelyria.org)
4. It is the applicant’s and / or property owner’s responsibility to show all easements on the site plan. (First Energy contacts for easement restrictions are available upon request).
5. If you are applying for a **Variance**, you will need to submit a processing fee of **\$100**, **Conditional Use Permit or Re-Zoning** processing fee is **\$500** along with a list of names/addresses of all adjoining/adjacent property owners no later than **15 days** prior to the scheduled Planning Commission Monthly Meeting.

1. PROJECT ADDRESS: \_\_\_\_\_ PARCEL #: \_\_\_\_\_
2. Name of Company: \_\_\_\_\_ Zoning District: \_\_\_\_\_
3. Property Owner on Record: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_
4. Check appropriate section:  
 **Application for Variance ~ \$100 fee (Code Section # \_\_\_\_\_)**  
 **Application for a Waiver to the Design Review Guidelines ~ no fee required**  
 **Application for Conditional Use Permit ~ \$500 fee**  
 **Application for Re-zoning ~ \$500 fee**  
**Currently Zoned:** \_\_\_\_\_ **Zoning Proposed:** \_\_\_\_\_  
 **Application to appeal a decision from staff (Design Review) ~ no fee**  
 **Application for a new subdivision ~ \$750 fee**  
 **Other (i.e.: Re-Plat, or Lot Combination for existing sub-lot(s) of record)**
5. Present use of the property: (i.e.: single-family dwelling, store, beauty shop, factory, etc.)  
\_\_\_\_\_
6. Complete this question if you checked “Application for Variance” or “Waiver to the Design Review Guidelines”.  
A. Describe the nature of the Variance requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The Commission will consider the following conditions.

Please answer each question clearly and concisely:

1. Are there exceptional or extraordinary circumstances that apply to your project that make the granting of the variance(s) and/or waiver(s) necessary? (Explain)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
2. Have other property owners in the vicinity already had a variance or waiver for the same request?  
If yes, please provide addresses:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How will this project; if granted, affect adjacent properties?

\_\_\_\_\_  
\_\_\_\_\_

4. Are there unique physical conditions that apply to your property? Is your lot unusually narrow or shallow? Is it irregular in shape? Is it on a hill or cul-de-sac street?

\_\_\_\_\_  
\_\_\_\_\_

5. If request is approved, will the use of the property change? If so; how?

\_\_\_\_\_  
\_\_\_\_\_

The undersigned is an owner of record, or an agent of the owner of record, of said property and states that the information contained in this application and in the attached pages is true to the best of his/her knowledge.

Property Owner: \_\_\_\_\_  
Signature Printed Name (write legibly)

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Telephone Cell Phone Email Address

Applicant: \_\_\_\_\_  
Signature Printed Name (write legibly)

\_\_\_\_\_  
Street Address City State Zip

\_\_\_\_\_  
Telephone Cell Phone Email Address

\*\*\*\*\* **STAFF COMMENTS/APPROVAL BELOW**\*\*\*\*\*

**PLANNING COMMISSION APPROVED** \_\_\_\_\_ **Meeting Date** \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature Date: \_\_\_\_\_ Signature Date: \_\_\_\_\_

**PLANNING COMMISSION APPROVED** \_\_\_\_\_ **Meeting Date** \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature Date: \_\_\_\_\_ Signature Date: \_\_\_\_\_