PUBLIC HEARING FORM

	accordance with Ordinance No. 1970-232 establishing	_
•	olic hearing will be held by the Board of Zoning Appe	-
	p.m. on (date of meeting):	
in the Council Chambers i	n the City Hall, 14600 State Road, to hear an applicat	ion for:
Name of applicant:		
Address of applicant:		
Reason for requested vari	ance:	
regarding the above app sworn affidavit, signed an of Zoning Appeals at the	end the Board of Zoning Appeals meeting but wis ication, please complete the Public Hearing Form. Interview, and should be forwarded to the Secretar e North Royalton Service Center, 11545 Royaltor you do not appear in person only sworn testimony sevidence at the hearing.	It must be a ry to the Board n Road, North
Date:		
FROM:	Residing at	
Your nam	Residing at	
Your location / proximity to	the property in question:	
Front Rear	Side Same side of street Across the	street
PLEASE STATE YOUR APPLICATION. REMARKS:	REMARKS ON APPROVAL OR DISAPPROV	/AL OF THE
(You may continue your re	,	
Sworn to and subscribed	before me byName(s) of Person(s)	
on thisday, mo	nth of, 20	
Seal:	Notary Public Signature:	