



CITY OF BROOK PARK

BUILDING DEPARTMENT | 5590 Smith Road | Brook Park | Ohio | 44142

| Email | buildingdept@cityofbrookpark.com

| Office | 216.433.7412

2025 BOARD OF ZONING APPEALS & PLANNING COMMISSION

Unless otherwise noted on the Agenda, meeting(s) begin promptly at 7:00^{P.M.}
in City Council Chambers (17400 Holland Road - Inside John A. Polonye Community Center)

SUBMITTAL DEADLINE FOR MEETING DATE	
December 20, 2024	January 6, 2025
January 17, 2025	February 3, 2025
February 14, 2025	March 3, 2025
March 21, 2025	April 7, 2025
April 18, 2025	May 5, 2025
May 16, 2025	June 2, 2025
June 13, 2025	July 7, 2025
July 18, 2025	August 4, 2025
August 22, 2025	September 8, 2025
September 19, 2025	October 6, 2025
October 17, 2025	November 3, 2025
November 14, 2025	December 1, 2025

PRIOR TO BEING PLACED ON AN AGENDA, any/all requests received by the Planning & Zoning Secretary for consideration by the Board of Zoning Appeals and/or Planning Commission **MUST** comply with criteria outlined for submission, and where required, are subject to review/recommendation by the following Departments: Building, Engineering, Fire. *It is strongly advised that you contact the Secretary, Carol Dell, for assistance during your preparation and/or submit your request in advance of the deadline date to avoid potential delays.* (Improper/insufficient submittals may be refused/returned until suitably complete)

CRITERIA FOR PLANNING/ZONING SUBMISSION(S):

Any/all requests must be **received by 4:00^{P.M.} on the deadline date by the Planning & Zoning Secretary:**

Carol Dell, Planning & Zoning Secretary | E-Mail: cdell@cityofbrookpark.com | Office: 216/433-7412 x 4245
c/o City of Brook Park Building Department | 5590 Smith Road | Brook Park | Ohio | 44142

Any/all requests must **include appropriate fee(s):** Board of Zoning Appeals: Residential \$25 | Commercial \$75
Planning Commission: Residential \$50 | Commercial \$75

Any/all requests must be **NO LARGER than 11" x 17" in size, and include:**

- o 1 Business Card from the Applicant (If available)
- o The original, ink signed Board of Zoning Appeals and/or Planning Commission Application
- o An electronic copy of entire submittal (PDF FORMAT ONLY via USB compatible drive OR call Secretary to email file)
- o 18 individually collated and stapled packets** that each MUST include, IN THE EXACT ORDER:
 - Copy of Application (Board of Zoning Appeals and/or Planning Commission)
 - Plot Plan of Property (Must clearly mark/measure all Property Lines, Setbacks, Structures, Fences, Pools, Parking etc.)
 - Supporting documents pertinent to request *** (Elevation Drawing/Photo, Materials, Floor Plan, Landscape, Signage etc.)

** Follow the submittal criteria separately if applying for both Planning AND Zoning

*** See Planning/Zoning Application(s) for additional supporting documents required for submittal

All hearings shall be public. Applicants will be notified of the meeting date/time when their request(s) will be. **Someone qualified to discuss the project MUST be present at the meeting;** failure to appear may result in dismissal of the request(s). It shall be the obligation of the applicant to bring all necessary witnesses, exhibits and evidence to present; the burden of proof is upon the applicant. Any member(s) of the Board/Commission shall have the right to question the applicant and all parties testifying either for or against the request(s). Properties located with-in the required radius of any Board of Zoning Appeals request(s), will be notified of the public hearing via USPS.



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2025 BOARD OF ZONING APPEALS (Variance)

The Board of Zoning and Building Appeals shall have the power, in specific cases, to vary the application of certain provisions of the Zoning Code in order that the public health, safety, morals, and general welfare may be safeguarded and substantial justice done.

PROJECT ADDRESS			<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL	ZONE	
PARCEL #			BUSINESS NAME (If Applicable)			
PROPERTY OWNER NAME(S)						<input type="checkbox"/> Will Attend Meeting
Phone #		Email				
Street Address		City		Zip		
AGENT/CONTACT PERSON NAME(S)						<input type="checkbox"/> Will Attend Meeting
Phone #		Email				
Street Address		City		Zip		

VARIANCE(S) REQUESTED	<input type="checkbox"/> Fence <input type="checkbox"/> Pool <input type="checkbox"/> Setback <input type="checkbox"/> Lot Line <input type="checkbox"/> Square Footage <input type="checkbox"/> Non-Masonry <input type="checkbox"/> Signage ¹ <input type="checkbox"/> Parking ² <input type="checkbox"/> Other:					
	¹ Provide rendering for proposed sign(s) that clearly indicates size and location ² Provide plan that clearly numbers, and designates (Customer, Employee, Land banked etc.) each space					
SUMMARY OF REQUEST						

<p>THE BOARD CAN GRANT A VARIANCE ONLY IF YOU CAN ESTABLISH YOUR RIGHT TO A VARIANCE BY MEETING ALL OF THE FOLLOWING CRITERIA. AS A PREREQUISITE, THE BOARD SHALL MAKE A FINDING BASED ON THESE FOUR CONDITIONS AS THEY APPLY IN EACH INDIVIDUAL CASE (MUST ANSWER ALL):</p>	
1. How would the literal application of the provisions of the Code result in an unnecessary hardship peculiar to the property involved? Hardships cannot be based on conditions created by the owner. (A theoretical loss or limiting possibilities of economic advantages are general hardships, not unnecessary hardships.)	
2. What other exceptional circumstances or conditions (such as topographical or geological conditions or types of adjoining developments) only applicable to the property involved or to the intended use of the property and not applicable to other properties within the same zone unless the same exceptional circumstances prevail exist?	
3. Explain why a variance would not be materially detrimental to the public welfare or injurious to the property or improvements in the neighborhood in which the property is located or to the abutting property owners.	
4. Explain why granting a variance would not be contrary to the general purpose, intent, and objectives of the Zoning Code and the planning program of the City.	

APPLICANT SIGNATURE		<input type="checkbox"/> Owner <input type="checkbox"/> Agent	DATE	
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2025 PLANNING COMMISSION APPLICATION

PROJECT ADDRESS			<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL	ZONE	
PARCEL #			BUSINESS NAME (If Applicable)			

PROPERTY OWNER NAME(S)					<input type="checkbox"/> Will Attend Meeting
Phone #		Email			
Street Address		City		Zip	
AGENT/CONTACT PERSON NAME(S)					<input type="checkbox"/> Will Attend Meeting
Phone #		Email			
Street Address		City		Zip	

APPROVAL(S) REQUESTED	<input type="checkbox"/> Aesthetic / Project ²	<input type="checkbox"/> Conditional Use Permit ²	
	<input type="checkbox"/> Front Porch	<input type="checkbox"/> Billboard ¹	<input type="checkbox"/> Telecommunication Tower ¹
	<input type="checkbox"/> Re-Zone ³	<input type="checkbox"/> Lot Split ^{3,4}	<input type="checkbox"/> Lot Consolidation ^{3,4}
	<input type="checkbox"/> Other:		
	¹ Provide Construction Drawings and/or Structural calculations ² Provide Detailed Business Plan per City Ordinance 1121.34 ³ Provide Legal Description ⁴ Provide Lot Split / Consolidation Plat and Mylar		

SUMMARY OF REQUEST		
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APPLICANT SIGNATURE			<input type="checkbox"/> Owner <input type="checkbox"/> Agent	DATE	
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