



**City of South Euclid  
Building Department  
1349 South Green Road  
South Euclid, Ohio 44121  
216-381-0400 / Fax: 216-291-4959**

## **Application for Relief –Board of Zoning Appeals**

- 1.) \*Name of Applicant \_\_\_\_\_ Case No. \_\_\_\_\_  
**\*If applicant is not the owner of the property, the application must be accompanied by an agent's authorization from the owner(s) indicating their authorization to make this application.**
- 2.) Address of Applicant \_\_\_\_\_
- 3.) Phone No. of Applicant \_\_\_\_\_ Fax No. \_\_\_\_\_
- 4.) Name of Owner \_\_\_\_\_
- 5.) Address of Owner \_\_\_\_\_
- 6.) Phone No. of Owner \_\_\_\_\_ Fax No. \_\_\_\_\_
- 7.) Property Location \_\_\_\_\_
- 8.) Relief Requested (Please be specific):

State Reasons for Need of Relief:

\*\* Your signature below grants permission to a representative(s) of the City of South Euclid to enter your property to take pictures, which will be presented at the Board of Zoning Appeals Meeting.

\_\_\_\_\_  
Applicant/Owner's Signature

\_\_\_\_\_  
Date

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**(Office Use Only)**

- 1.) Nature of action previously requested by applicant:  Written  Oral
- 2.) Applicant's prior request for Relief denied by \_\_\_\_\_ Date \_\_\_\_\_
- 3.) Reason for denial – Chapter \_\_\_\_ Ordinance 13-69 – The Zoning Code, particularly Section \_\_\_\_\_.
- 4.) Received for filing date \_\_\_\_\_.
- 5.) Fee Paid \_\_\_\_\_.

\_\_\_\_\_  
Building Commissioner