

BEFORE THE PLANNING COMMISSION OF THE CITY OF ONTARIO, OHIO

APPLICATION FOR APPEAL

Name

DATE: _____

Address

FEE: _____

City, State and Zip

PERMIT #: A-_____

We, the undersigned, hereby appeal to the Planning Commission of the City of Ontario, Ohio, the decision of the Zoning Inspector on _____ regarding the following: _____
Date

Date

Applicant