

OHIO TOWNSHIP BOARD OF ZONING APPEALS/ ZONING COMMISSION
BOARD MEMBER QUESTIONNAIRE

Print Full Name: _____

ADDRESS: _____

HOME PHONE: () _____ CELL PHONE: () _____

Email Address: _____

How long have you Lived in Ohio Township? _____

Describe the general nature of the area of Ohio Township where you live, such as rural setting, urban setting, small lot, large lot subdivision, etc.

What do you feel is the one characteristic of our Township that is most appealing to you and why?

Do you enjoy participation in-group discussion and decision-making processes and do you feel that you are able to present your position in a professional manner?

Have you ever served on a Board like this one? If so, please describe your role and or responsibilities?

Would you be willing to familiarize Ohio Township's Zoning Resolution in order to make sound decisions based upon their purpose of promoting the general Health and welfare of our community?

Would you be available to attend an average of two meetings per month, and would you be willing to devote ample time prior to each meeting for review of the cases to be presented?

Would you be willing to attend periodic training, or work sessions to improve upon your understanding of various zoning principals?

What, If any, employment, experience or training have you had which could improve upon your understanding of zoning issues?

Are you aware of any aspect of your employment or current circumstances that could result in "conflict of interest" issues being raised on more than an occasional basis? If so, please explain?

Under what circumstances would you agree to granting of a variance to a zoning regulation? What criteria would you use in formulating your decision?

Please provide us with a few general comments conveying what personality traits you exhibit and what abilities you possess that would make you an ideal choice for appointment or reappointment to the Ohio Township Board of Zoning Appeals and or the Zoning Commission?

Any additional comments or concerns please make them below.

I certify that the above statements on pages one and two are true and correct to the best of my knowledge and ability.

X _____
Your Signature and date