

CUYAHOGA COUNTY BOARD OF HEALTH

▪ 5550 Venture Drive ▪ Parma, Ohio 44130 ▪ Phone: 216-201-2020 ▪ Fax: 216-676-1317 ▪ www.ccbh.net

Sewage Treatment System Variance Request Application

Property Information		
Property Address:	Municipality:	Zip Code:
Permanent Parcel Number:	Sub-lot Number:	Water Supply (city, well, cistern):
Date Parcel was Created :	Lot Dimensions :	Square Footage :
Property Owner Name :		Phone Number :
Email Address:		
Property Owner Address:	Municipality:	Zip Code:
Developer Name (if applicable):		Phone Number :
Variance Request Fee: \$ 600.00 <small>*This fee is not refundable</small>		Make Checks Payable To: <u>Cuyahoga County Board of Health</u>
Variance Request Information		
***** Please refer to the back of this application for Variance Request procedures and requirements. *****		
Please Indicate the Section of OAC 3701-29 or CCBH Sewage Treatment System Rules the Variance Request is for.		
Please use the space below to describe the reasons for the variance request. Additional Pages can be attached as needed.		
By signing below I certify that to the best of my knowledge all the information provided with this application is factual.		
Applicant's Signature: _____		Date: _____
*****For Office Use Only Below This Line*****		
Notes Regarding Variance Submittal:		
Date Received:	\$ Fee paid:	Log-in #:

The applicant for a Request for Variance must:

1. Complete the application form
2. Pay the required fee upon filing
3. Provide a total of two (2) copies of the application and all supporting evidence and documentation supporting the request for variance. If possible, an electronic copy should be supplied as well.

Ohio law grants authority to the Board of Health to review and grant variances as follows:

(A) The board of health may grant a variance from the requirements of 3701-29 of the Administrative Code when a person has made written application for a variance to the board requesting to variance from a specified rule or rules and the applicant shows that because of practical difficulties, or other special conditions, compliance with this chapter will cause unusual and unnecessary hardship. The board of health shall not grant a variance that would defeat the spirit and general intent of the chapter or is otherwise contrary to the public interest, adversely affect the public health, cause contamination of the environment, or not comply with the requirements of Chapter 3718 of the Revised Code.

In making the application for a variance, the applicant shall keep in mind the above statutory authority. The applicant shall provide with this application an explanation of the facts and/or circumstances that meet the criteria set forth in the law listed above. In order for the Board to have a full understanding of the application, the applicant must provide the following information in support the application:

- a) an explanation of the particular rule or rules from which the applicant seeks relief;
- b) such other drawings or plats that will show the subject of the request for variance such as location of property boundaries; location of right of way; location of foundation wall of the building, dwelling or other structure; location of the subject of the notice;
- c) copies of any photographs or other documents in support of the application.
- d) a signed original Waiver and Release of Liability Form (Form will be provided at time of application.)

Upon filing, the submitted application and supporting documents will be reviewed for completeness and compliance with Board Rules and all pertinent state and local rules and regulations. If incomplete, the applicant will be notified. If the request for variance and supporting documents are received in the offices of the Board of Health at least four (4) weeks prior to the next regularly scheduled meeting of the Board, the Board may seek to schedule the hearing at that next Board meeting. Otherwise, the Board will set the matter for hearing at a later meeting. The applicant will be notified of the scheduled hearing.

The hearing will be conducted by the Board in the Board room used for the regular meetings of the Cuyahoga County Board of Health unless another location is specified in advance by the Board. The hearing will be open to the public. The applicant may appear with or without counsel, may present witnesses and exhibits in support of the variance and may cross examine witnesses who present testimony against the applicant. The applicant may request one extension of time or re-scheduling of the hearing but must submit a request in writing to the Board more than seven (7) days prior.