

Russell Township
8505 Kinsman Road
Novelty, Ohio 44072
Administrative Building



phone 440-336-8086
zoning@russelltwpoh.gov

ZONING CONSENT LETTER OF AUTHORIZATION AND REPRESENTATION

FORM NO. 11

I/We: _____
Print Name(s)

The undersigned owner(s) of the real property located at:

Street Address Post Office State Zip Code

Phone No.: () _____ Email: _____

Do hereby authorize: _____ located at:
Print Name and Name of Company (if applicable)

Street Address Post Office State Zip Code

Phone No.: _() _____ Email: _____

To act as my/our authorized representative regarding the following application to be submitted to the Russell Township Zoning Department:

_____ Application for a zoning certificate

_____ Application for a conditional zoning certificate

Signature(s) of owner(s): _____

Print name(s): _____

Date: _____

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For Official Use Only

Date received: _____

Permit Number: _____

Facility File Number: _____