



# City of Macedonia

## The Crossroads of Northeast Ohio

9691 Valley View Road • Macedonia, Ohio 44056  
(330) 468-8360 • FAX (330) 468-8396

Building/Engineering/Zoning/Planning Department

## ZONING BOARD OF APPEAL REQUIREMENTS and MEETING DATES

**ALL ITEMS IN RED BELOW MUST BE SUBMITTED WITH COMPLETED APPLICATION AND FEE.**

1. **BOARD OF ZONING APPEALS APPLICATION** and fee.
  - a. Residential: \$100
  - b. Commercial: \$200
2. **SITE PLAN** depicting the following:
  - a. Property address, property lines, and dimensions
  - b. Location of main and accessory structures including property line setbacks
  - c. Location of the variance or request for special approval
3. **WRITTEN STATEMENT** for each factor listed below, either for an “Area Variance” or “Use Variance”, thereby describing the reason for the variance request. The Board shall review each application for a variance to determine if it complies with the purpose and intent of this Zoning Code and evidence demonstrates that the literal enforcement of this Zoning Code will result in practical difficulty or unnecessary hardship.

### **Area Variance.**

The following factors shall be considered and weighed by the Board to determine practical difficulty:

- a. Whether special conditions and circumstances exist which are peculiar to the land or structure involved and which are not applicable generally to other lands or structures in the same zoning district. Examples of such special conditions or circumstances are exceptional irregularity; narrowness, shallowness or steepness of the lot; or proximity to non-conforming and inharmonious uses, structures or conditions.
- b. Whether the property in question will yield a reasonable return or whether there can be any beneficial use of the property without the variance;
- c. Whether the variance is substantial and is the minimum necessary to make possible the reasonable use of the land or structures;
- d. Whether the essential character of the neighborhood would be substantially altered or whether adjoining properties would suffer substantial detriment as a result of the variance;
- e. Whether the variance would adversely affect the delivery of governmental services such as water, sewer, trash pickup;
- f. Whether the property owner purchased the property with knowledge of the zoning restrictions;
- g. Whether special conditions or circumstances exist as a result of actions of the owner;
- h. Whether the property owner's predicament feasibly can be achieved through some method other than a variance;
- i. Whether the spirit and intent behind the zoning requirement would be observed and substantial justice done by granting a variance;
- j. Whether the granting of the variance requested will confer on the applicant any special privilege that is denied by this regulation to other lands, structures, or buildings in the same district; and
- k. Whether a literal interpretation of the provisions of this Code would deprive the applicant of rights commonly enjoyed by other properties in the same district under the terms of this Code.



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### Use Variance.

The applicant must demonstrate such hardship by clear and convincing evidence that all of the following criteria are satisfied:

- a. The property cannot be put to any economically viable use under any of the permitted uses in the zoning district in which the property is located;
  - b. The variance requested stems from a condition which is unique to the property at issue and not ordinarily found in the same zone or district;
  - c. The hardship condition is not created by actions of the applicant;
  - d. The granting of the variance will not adversely affect the rights of adjacent property owners or residents;
  - e. The granting of the variance will not adversely affect the public health, safety or general welfare;
  - f. The variance will be consistent with the general spirit and intent of the Planning and Zoning Code; and
  - g. The variance sought is the minimum that will afford relief to the applicant.
4. **Eight (8) hard copies** of the application, plans, and supporting information shall be submitted to the Building Department by the due date indicated on the BZA meeting schedule.
  5. **Identification of all owners of all property abutting** in any direction to the property(ies) of the appellant.
  6. **Authorization by the property owner.**

**The Zoning Board of Appeals meets at 6:30 p.m. on the third Wednesday of each month  
in Council Chambers at Macedonia City Hall located at 9691 Valley View Road.**

**Meeting dates are subject to change.**

**Contact the Building Department at (330) 468-8364.**



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## BOARD OF ZONING APPEALS

### Meeting Dates

2026 MEETING DATES	DEADLINE FOR SUBMITTAL
January 21, 2026	December 19, 2025
February 18, 2026	January 23, 2026
March 18, 2026	February 20, 2026
April 15, 2026	March 20, 2026
May 20, 2026	April 24, 2026
June 17, 2026	May 22, 2026
July 15, 2026	June 19, 2026
August 19, 2026	July 24, 2026
September 16, 2026	August 21, 2026
October 21, 2026	September 18, 2026
November 18, 2026	October 23, 2026
December 16, 2026	November 20, 2026

**ALL APPLICATIONS MUST BE SUBMITTED BY 3 P.M. ON THE DUE DATE: NO EXCEPTIONS**

**ALL SETS MUST INCLUDE:**

- Application
- 8 copies of plans and supporting documentation
- Fee



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### APPLICATION FOR HEARING BEFORE THE MACEDONIA ZONING BOARD OF APPEALS

See instruction page for more information. Appellant is to provide EIGHT (8) copies of site plans, pictures, etc., and a written statement. (Residential fee: \$100.00; Commercial fee: \$200.00)

Address of Property Involved: \_\_\_\_\_

Nature of Request: \_\_\_\_\_

Applicant Name or Agent Therefore: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

Applicant Phone: \_\_\_\_\_ Applicant Email: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_  
(if different from applicant)

Property Owner Address: \_\_\_\_\_

Property Owner Phone: \_\_\_\_\_ Property Owner Email: \_\_\_\_\_

**SIGNATURE OF APPELLANT.**  
**(AUTHORIZATION OF PROPERTY OWNER REQUIRED IF DIFFERENT FROM APPLICANT)**

\_\_\_\_\_ Date: \_\_\_\_\_  
By my signature, I attest to the accuracy of all statement on this form

#### OFFICIAL USE ONLY

Received Date: \_\_\_\_\_ Case Number: \_\_\_\_\_

Variance Requested: \_\_\_\_\_

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