



RESIDENTIAL GROWTH MANAGEMENT ALLOCATION APPLICATION

**46 RAVENNA STREET, SUITE D-3
HUDSON, OHIO 44236-3034
330-342-1790 330-656-1753 FAX 330-342-1880
Visit our Website at www.hudson.oh.us**

SECTION I

PROJECT ADDRESS (S) _____

SUBDIVISION: _____ SUBLOT(S): _____

APPLICATION FOR ALLOCATION DATE: (CHECK ONE)

AUGUST 1, 2010 (APPLICATION DEADLINE MAY 15, 2010) _____ MARCH 1, 2011 (APPLICATION DEADLINE DECEMBER 15, 2010) _____

SECTION II

TOTAL NUMBER OF ALLOTMENTS BEING APPLIED FOR THE PERIOD IDENTIFIED ABOVE: _____

SECTION III

TOTAL NUMBER OF ALLOTMENTS, AS IDENTIFIED IN SECTION II, BEING APPLIED FOR AS EXEMPT DEVELOPMENT,
AS DEFINED BY SECTION 1211.03(b): _____

TOTAL NUMBER OF ALLOTMENTS, AS IDENTIFIED IN SECTION II, BEING APPLIED FOR AS PRIORITY DEVELOPMENT,
AS DEFINED BY SECTION 1211.03(c): _____

SECTION IV

PURSUANT TO SECTION 1211.05(c), THE APPLICANT MUST OWN THE PROPERTY FOR WHICH THIS APPLICATION FOR ALLOTMENT IS APPLICABLE. **PROOF OF SUCH OWNERSHIP MUST ACCOMPANY THIS APPLICATION FOR ALLOTMENT (i.e., tax receipt).**

SECTION V

TOTAL NUMBER OF ALLOTMENTS, AS IDENTIFIED IN SECTION II, BEING APPLIED FOR AS OPTIONAL MULTI-YEAR ALLOTMENT RESERVATIONS, AS PER SECTION 1211.04(f):

NUMBER REQUESTED FOR AUGUST 1, 2010 _____ NUMBER REQUESTED FOR MARCH 1, 2011 _____

NUMBER REQUESTED FOR AUGUST 1, 2011 _____ NUMBER REQUESTED FOR MARCH 1, 2012 _____

AFFIDAVIT OF OWNER/APPLICANT

It is understood and agreed by this Applicant that any error, misstatement, or misrepresentation of material fact, either with or without intention on the part of this Applicant, shall cause a refusal of this application. It is understood and agreed by this Applicant that completing this application does not represent an award of an Allotment. An award of an Allotment does not guarantee the Applicant a Zoning Certificate or Building Permit. It is understood and agreed by this Applicant that receiving approval from the Architectural and Historic Board of Review, or any other administrative body of the City, does not constitute an award of an Allotment.

APPLICANT AND/OR PURCHASE OPTION HOLDER: (If Purchase Option Holder: Purchase Agreement contract must be submitted for verification)

SUBMITTED (PLEASE TYPE OR PRINT): _____ DATE: _____

SIGNATURE: _____ TITLE: _____

ADDRESS: _____ PHONE #: _____

OWNER OF PROPERTY: _____ DATE: _____

SIGNATURE: _____ TITLE: _____

ADDRESS: _____ PHONE #: _____

FEE PAID: _____ CHECK NO.: _____ APP NO.: _____ DATE REC'D: _____ FEMA FLOODPLAIN Y N _____

