Form No. 6-O Prescribed by Ohio Secretary of State (05/2026)

# Petition for a Township Zoning Referendum

To be filed with the Board of Township Trustees within 30 days after the adoption of the amendment.
*R.C. 519.12(H), 3501.38, 3503.06*

_____
(Name and number of the proposal, if any)

A proposal to amend the zoning map of the unincorporated area of _____ Township,

_____ County, Ohio, adopted on the ___ day of _____ , _____ .

The following is a brief summary of the proposed zoning amendment:

**To the Board of Township Trustees**

**of _____ Township, _____ County, Ohio:**

We, the undersigned, being electors residing in the unincorporated area of _____ Township,

included within the _____ Township Zoning Plan, equal to not less than thirty-five percent of the total vote cast for all candidates for governor in the area at the preceding gubernatorial election, request the Board of Township Trustees to submit this amendment of the zoning resolution to the electors of

_____ Township residing within the unincorporated area of the Township included in the

_____Township Zoning Resolution, for approval or rejection at a special election to be held on the day of the next primary or general election to be held on the ___ day of _____ , ____ , pursuant to Section 519.12 of the Revised Code.

**Signatures on this petition must be written in ink.**

| | Signature | Voting Residence, Street Number and Address | City, Village or Township | County | Date of Signing |
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| 1. | | | | | |
| 2. | | | | | |
| 3. | | | | | |
| 4. | | | | | |

| | Signature | Voting Residence, Street Number and Address | City, Village or Township | County | Date of Signing |
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## Circulator Statement

***Must be completed and signed by the circulator.***

I, _____, declare under penalty of election falsification that I reside at the address
Printed Name of Circulator
appearing below my signature; that I am the circulator of the foregoing petition containing _____ signatures;
Number
that I witnessed the affixing of every signature; that all signers were to the best of my knowledge and belief qualified to sign; and that every signature is to the best of my knowledge and belief the signature of the person whose signature it purports to be or of an attorney in fact acting pursuant to section 3501.382 of the Revised Code.

**WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE**

_____
**Signature of Circulator**

_____
Permanent Residence Address

_____ _____ _____
City or Village State Zip Code

**Form 6-O - Petition for township zoning referendum**

**Filed** _____, _____
Month and Day Year

_____
Signature of Township Fiscal Officer