

ZONING COMMISSION/ZONING BOARD OF APPEALS

P.O. Box 447 – PUT-IN-BAY, OHIO 43456

APPLICATION FOR A ZONING CERTIFICATE

All information on this document must be completed before the application can be processed for a Zoning Certificate. This document must be filed in triplicate.

Date _____

APPLICATION NO _____

1. Name of landowner _____

Address _____

13. Number of stories _____.

14. Basement _____yes _____no

2. Location of Property _____

15. Amount of usable living space (floor space) excluding basements, porches, garages, breezeways and terraces:

3. Occupant if other than landowner _____

4. Proposed use

a. First Floor _____square feet

_____New Construction

b. Second Floor _____square feet

_____Remodeling

16. Proposed off street parking will occupy _____square feet.

_____Accessory Building

17. Additional comments:

_____Residence _____No. of families

_____Business

_____Manufacturing

_____Sign Board (size _____)

_____Other (provide explanation – use additional paper if needed)

5. Main road frontage is _____feet

18. On the back of this sheet, provide a sketch of your lot showing any existing buildings and any proposed construction or use for which this application has been made. Fill in all dimensions using accurate measurements and indicate North. It is the applicant's responsibility to provide the location of lot lines and proposed construction boundaries to the Zoning Inspector's satisfaction. Include building plan, floor plan, elevations as well as site plan as required.

6. Setback is _____feet from side of road right of way.

7. Side yard setback (viewing from front of property) is _____feet on right side and _____feet on left side.

8. Rear yard setback is _____feet.

9. Depth of lot from right of way is _____feet.

10. Dimensions of building _____feet wide and _____feet deep.

11. The building's height is _____feet.

12. Building's proposed use _____

Applicant's Signature

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Sketch in lot, existing buildings and proposed construction or use below.
(Include with application building floor plan and elevations)

Do Not Write Below This Line

**ZONING CERTIFICATE
PUT-IN-BAY TOWNSHIP**

Application NO. _____

Upon information provided by the applicant and my personal inspection of the property in question, the proposed usage is found to _____ be in accordance _____ NOT be in accordance with the Put-in-Bay Township Zoning Resolution and is hereby _____ for the _____ District.

Date application received _____. Fee paid _____.

Date determination made _____.

If certificate was refused, reason for refusal is _____

Zoning Inspector