

City of Chardon, Ohio

APPLICATION FOR ZONING CERTIFICATE

Application No. _____

The undersigned hereby makes application for a ZONING PERMIT for the purpose set forth herein. The submittal of this application constitutes an agreement to conform to all applicable requirements of the ZONING ORDINANCE and other regulations of the Municipality. Said agreement is a condition of the permit issuance.

PARCEL NO.: _____ PROJECT LOCATION _____

ZONING DISTRICT: _____ PREVIOUS USE: _____

NAME OF PROPERTY OWNER (if different from applicant): _____

NEW BUSINESS NAME: _____

PROPOSED USE: _____

PROPOSED USE:

- () Residential
- () Commercial
- () Industrial
- () Accessory
- () Other

PERMIT REQUESTED:

- () New Building (sf. area _____)
- () Remodel existing building/structure (sf. area _____)
- () Fence
- () Occupancy (sf. area _____)
- () Other _____

TYPE OF WATER AND SANITARY SERVICE (Public/Private)

Water Service: _____ Sanitary Service: _____

PROPOSED BUILDING HEIGHT: Stories: _____ Feet _____

PERCENTAGE OF LOT TO BE OCCUPIED (Comm./Ind. bldgs only): _____

INSURANCE EXPIRATION DATE: Liability _____ Worker's Compensation _____

ESTIMATED COST OF ALL PROPOSED WORK _____.

I, _____, Applicant, do hereby swear or affirm that the information provided in this application and attachments is true.

(Applicant's signature)

SWORN TO AND SUBSCRIBED TO IN MY PRESENCE THIS _____ DAY OF

Address: _____

_____, 20__.

Phone: _____ Fax: _____

Notary Public

E-Mail: _____

FOR OFFICIAL USE ONLY

RECEIVED: _____ FEE DUE: permit+deposits _____ DATE PAID: _____

REMARKS: _____

APPROVED/DENIED

(Rev. 04/11/09)

Zoning Inspector Date