APPLICATION FOR ZONING PERMIT MERCER COUNTY, OHIO

Application No.	

The undersigned applies for a zoning permit for the following use, said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all the information and attachments to this application are true and correct.

1.	Location Descri	Description (if not located in platted subdivision, attach a legal description)					
	Subdivision Nar	ne					
	Lot No	Street					
2.	Name of Owner	r					
	Mailing Address	3					
	Phone Number:	Home	Work		Cell _		
	Estimated Cost		Builder				
3.	Existing Use						
4.	Property presently zoned as:						
5.	Proposed Use:	Residential	Commercia	.1	Industrial		
		New Construction	Remodeling	S	Number of Ro	esidential Units	
		Accessory Building	Deck		Fence	Sign	
		Size	Area		(At	ttach drawings)	
6.	. Sanitary Sewer Permit Number						
7.	Proposed Date	of Completion					
8.	Lot: Width		_Depth		Area		
9.	Building Size (S	Square Feet)					
	Residential: Livi	ing Area	_sq. ft. Garage		Basement	t	
	Business	Industrial			_Accessory Bldg		
10.	Building Heigh	ts: Stories	Feet				
11.	Yard Setback D	Dimensions: Front		Rear _			
One Side				Sum o	f side yards		

12. Accessory Building Dimensions: Height	t Size						
13. Flood Zone 14. Number of off-street parking spaces to be provided							
							15. Number of off-street loading berths to b
16. Type of dust-free, hard surface for drive	eway, off-street parking areas, and off-street loading berths.						
Asphalt Concrete	Double Chip and Seal						
Other: (explain)							
17. Does the dwelling meet all requirements YES NO	of the Residential Design and Appearance Standards:						
18. Detention Basin: Volume	Release Rate						
19. Site plan submitted in triplicate, drawn to scale, showing actual dimensions and shape of lot, with exact sizes and locations of uses. YES NO							
9 • ,	rawn to scale, showing sufficient information to determine if al design and appearance standards YES NO						
21. Zoning Permit fee paid. YES	_ NO						
22. On a separate sheet attach a list of other explain any points you feel need clarification.	supplemental requirements or conditions that will be met, or ation.						
23. By signing this Agreement you are responses responses to perform street cleaning, the	onsible for maintaining a clean street. If the Village finds it e applicant will be charged accordingly.						
NOTE: This permit shall be void if work is	not started within one (1) year or completed within two (2) years						
Signature of Owner	Date						
(FO	OR OFFICAL USE ONLY)						
Date received	Fee Paid						
Date of action on application	Denied						
If application is denied, reason for denial							
	Zoning Inspector						