

APPLICATION FOR ZONING PERMIT

Brownhelm Township, Lorain County, Ohio

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 information and attachments to this application are true and correct. The applicant is required, in addition to this information requested on this form to submit a plot plan drawn to scale, showing the actual dimensions and shape of the lot, exact size and locations of existing buildings on the lot, and the location and dimensions of the proposed alteration. This application shall expire and may be revoked if the work has not begun within one (1) year or substantially complete within two and one half (2-1/2) years.

Applicant: _____ Phone Number: _____

Address: _____

Property Owner: _____ Phone Number: _____

Property Address: _____

Subdivision: _____ Sub-Lot No. _____

Property Size: Width: (ft) _____ Depth: (ft) _____ Area: (acres) _____

Permanent Parcel Number: _____ Property Use: _____

Zoned As: _____ Driveway Permit Required: _____ Sanitary Permit Required: _____

Proposed Building: _____

Estimated Value of Improvements \$ _____

Enclose attachment showing plot plan, indicating size and location of proposed building.

Date Received: _____

Applicant: _____

Zoning Inspector: _____