

Application for Zoning Permit

Name of Applicant: _____ Telephone Number: _____

Mailing Address: _____

Property Address: _____

1) Subdivision Name: _____ VMS designation _____ Deed Restrictions Y / N

Lot# _____ (If not located in a platted subdivision, attach a legal description)

2) Owner: Name: _____

Mailing Address _____

Telephone _____ email address _____

3) Property zoned & Parcel #: _____ Variance/ Conditional use # _____

4) Proposed use: Business Residence (#of units) _____ Remolding Industry

Accessory structure Sign (Size) _____ Other (explain) Swimming pool

Note: If proposed use is business or industry, enclose a detailed description of the business or industry.

5) Type of sewage Disposal _____

6) Lot Dimensions: Width _____ ft. Depth _____ ft. Lot Area _____ acres/ sq. ft.

7) Percentage of lot to be occupied _____ % Does the 3:1 ratio apply? Yes No

8) Living area (residences only) _____ sq. ft.

9) Other dimensions: Garage _____ sq. ft. Basement: _____ sq. ft. Accessory structure _____ sq. ft.

10) Yard dimensions: Front _____ ft. Rear _____ ft. One side _____ ft. Sum of side yards _____ ft.

11) Building Heights: Front _____ ft. Stories _____

12) Setbacks: Front: _____ ft. Rear: _____ ft. Right: _____ ft. Left: _____ ft.

13) Commercial: _____ sq. ft. Industrial: _____ sq. ft. Driveway Alt: 1 — 2 (circle one)

14) On a separate sheet, attach a list of other supplemental requirements or conditions that will be met, and/ or explain any points needing clarifications. Note: this permit shall be void if work is not started within 180 days or completed within 18 months of the signing date.

15) 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 the information requested on this form, to submit plans in duplicate and drawn to scale, showing the actual dimensions and shape of the lot, exact sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed buildings or alterations.

16) By signing below, the applicant agrees to be liable for any damage caused to a designated township road by delivery or construction vehicles accessing this site. Any physical barriers used to direct traffic or minimize road damage must not be placed on the road surface or pose a danger to traffic in any way. Barriers must be constructed of light materials (e.g., no steel or heavy wood posts or fences). Darby Township may take photographs of the road and right-of-way before and after construction to document any damage. **DO NOT USE RIGHT OF WAY FOR HEAVY EQUIPMENT. EXISTING DRIVEWAY MUST BE USED.**

Signature(s) of applicant(s)

Date

Signature of Zoning Officer

Date

Fee Paid _____ NA _____

Check # _____ NA _____

Approved Denied
(If denied, attach explanation)

Receipt # _____ NA _____

Make Checks Payable to: Darby Township Trustees Union County Ohio

(Internal use only)