

Valley Township

Application for Zoning Certificate

Sec. 519.16 O.R.C.

Application No. _____

_____ Township _____ County

To the Board of Township Trustees:

The undersigned hereby applies for a Zoning Certificate for the following use, to be issued on the basis of the representations contained herein, all of which applicant says are true:

1. Location of Property _____

2. Name of Land Owner _____

3. Occupant _____

4. Proposed Use:

- | | |
|--|--|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Business |
| <input type="checkbox"/> Remodeling | <input type="checkbox"/> Manufacturing |
| <input type="checkbox"/> Accessory Building | <input type="checkbox"/> Sign Board - Size _____ |
| <input type="checkbox"/> Residence _____ No. of Families | <input type="checkbox"/> Other (explain below) |

Other: _____

5. Fill in all dimensions. On page two, sketch lot showing dimensions, existing buildings, and proposed construction or use for which application is made. Orientate to North.

A) Main road footage _____ feet

B) Set back from side of road right of way:
_____ feet

C) Side yard clearance:
_____ side _____ feet
_____ side _____ feet

D) Rear yard clearance _____ feet

E) Depth of yard from right of way:
_____ feet

F) Dimensions of building:
Width _____ feet
Depth _____ feet

G) Highest point of building above the
established grade _____ feet



N

6. Buildings:

Use _____

Number of stories: _____ Basement: _____

First floor _____ square feet Second floor _____ square feet

Off street parking _____ square feet

7. Remarks: _____

Witness

Applicant

Note: Submit three (3) copies of this application

DO NOT WRITE BELOW THIS LINE

Filed with Zoning Inspector _____ 20____

Zoning Certificate

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Upon the basis of Application No. _____, the statements in which are made a part hereof, the proposed usage is _____ found to be in accordance with the Township Zoning Resolution and is hereby _____ for the _____ District
(approved-rejected)

Township Zoning Inspector

_____ Township _____ County

Date Application received _____ 20____ Fee paid \$_____

Date Application ruled on _____ 20____

If Certificate refused, reason for refusal: _____
