

NON-RESIDENTIAL ZONING PERMIT APPLICATION

PERMIT No.: _____

GENOA TOWNSHIP ZONING DEPT. (614) 899-0725 PHONE, (614) 882-7143 FAX
5111 S. OLD 3C HWY., WESTERVILLE, OHIO 43082, WWW.GENOAATWP.COM

ADOPTED: 01/03/08

PROPERTY OWNER(S): _____ MAILING ADDRESS: _____

DEVELOPER/CONTRACTOR: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

PRIMARY CONTACT: _____ PHONE: _____

ADDRESS: _____ EMAIL: _____

PROPERTY ADDRESS: _____

SUBDIVISION NAME (IF APPLICABLE): _____ LOT NUMBER(S): _____ LOT SIZE: _____

ZONING DISTRICT(S): RURAL RESIDENTIAL (RR) SUBURBAN RESIDENTIAL (SR) PLANNED COMMUNITY FACILITIES (PCF)
 COMMUNITY BUSINESS (CB) PD-1 (RESIDENTIAL) PD-2 (COMMERCIAL) PD-3 (INDUSTRIAL-WAREHOUSE) PD-4 (OFFICE)PRESENT USE(S): RESIDENTIAL COMMERCIAL INDUSTRIAL INSTITUTIONAL AGRICULTURAL OTHER: _____REQUESTED PERMIT: NEW BUILDING ADDITION ACCESSORY TEMPORARY FACILITY TOWER / ANTENNA OTHER

DESCRIPTION OF REQUEST (INCLUDING PROPOSED DIMENSIONS): _____

NOTE: SOME OF THE FOLLOWING QUESTIONS MAY NOT APPLY, DEPENDING ON THE PERMIT THAT YOU HAVE REQUESTED ABOVE.

ROAD FRONTAGE: _____ FT. LOT WIDTH (AT BUILDING LINE): _____ FT. SETBACKS: FRONT: _____ FT. / R-SIDE: _____ FT. / L-SIDE: _____ FT. / REAR: _____ FT.

TOTAL BUILDING AREA: _____ SQ. FT. / FIRST FLOOR: _____ SQ. FT. / SECOND FLOOR: _____ SQ. FT. / OTHER: _____ SQ. FT.

PROPOSED STRUCTURE HEIGHT: _____ FEET _____ STORIES TOTAL NUMBER OF BUILDINGS: _____ TOTAL NUMBER OF UNITS: _____

TOTAL BUILDING COVERAGE: _____ SQ. FT. PERCENTAGE OF LOT OCCUPIED BY BUILDINGS: _____% TOTAL IMPERVIOUS SURFACES: _____%

BY SIGNING THIS APPLICATION ON THE LINE BELOW, I HEREBY CERTIFY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND ACCURATE. I ALSO AGREE TO BE BOUND BY PROVISIONS OF THE ZONING RESOLUTION OF GENOA TOWNSHIP, AS WELL AS ACKNOWLEDGE THE FOLLOWING:

- I HAVE ATTACHED OR ENCLOSED WITH THIS APPLICATION ALL MATERIALS WHICH ARE TO BE CONSIDERED FOR APPROVAL WITH THIS APPLICATION, INCLUDING A SITE PLAN, DRAWN TO SCALE; THAT DELINEATES THE SIZE AND LOCATION OF ALL EXISTING AND PROPOSED BUILDINGS AND IMPROVEMENTS.
- I UNDERSTAND THAT IT SHALL BE UNLAWFUL TO USE OR OCCUPY ANY BUILDING OR PREMISES UNTIL A CERTIFICATE OF COMPLIANCE HAS BEEN ISSUED BY THE ZONING INSPECTOR STATING THAT THE PROPOSED USE OF THE BUILDING OR LAND CONFORMS TO THE REQUIREMENTS OF THE ADOPTED ZONING RESOLUTION OF GENOA TOWNSHIP (APPLICABLE TO NEW HOME, CONDO, BUILDING ADDITION AND ACCESSORY STRUCTURE PERMITS).
- I HAVE SUBMITTED APPLICABLE FEES, PER THE CURRENT GENOA TOWNSHIP ZONING FEE SCHEDULE.

SIGNATURE OF OWNER(S)/AGENT _____

OWNER(S)/AGENT'S NAME PRINTED OR TYPED _____

DATE OF APPLICATION _____

PLEASE NOTE: INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY

DATE RECEIVED: _____ STAFF COMPLETING REVIEW: _____ COMPLETE APPLICATION: YES NODATE OF ACTION: _____ ACTION: APPROVED DENIED FOUNDATION SURVEY REQUIRED NOTES: _____