

Application for Zoning Permit

Liberty Township, Fairfield County, Ohio

Application Number _____

The undersigned applies for a Zoning Permit for the purpose stated. The requested Zoning Permit is 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 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.

1. Name of Property Owner: _____
Property Address: _____
Mailing Address (if different than property address): _____
Phone Number: _____ Email Address: _____
2. Parcel Number: _____ Subdivision: _____ Property presently zoned: _____
3. Estimated cost of project: \$ _____
4. Proposed Use:
 New House Total Acreage: _____ Lot size: Width: _____ Depth: _____
Total living floor space: _____ sq. ft. Number of Stories: _____ Width: _____ Depth: _____ Height: _____
Sewage Permit Number: _____ Water Permit Number: _____
 Sign / Billboard Accessory Structure/Addition House Addition Deck/Patio/Porch/Pergalo Fence
 Driveway Width: _____ Depth: _____ Height: _____
 Commercial Off-street parking spaces: _____ Loading berths: _____
 Above Ground Pool In Ground Pool - requires fence permit on this permit or prior permit # _____
 Other _____

This permit application applies only to the Liberty Township Zoning Resolution. The Applicant understands that additional permits may be required from utilities or other regulatory agencies and it is their responsibility to contact the appropriate agencies and comply with their regulations. Further, the Applicant understands this permit is void if the work is not commenced within one (1) year or is not completed within two and one-half (2 ½) years. By signing this permit, the Applicant gives permission for the Zoning Inspector to conduct a reasonable number of inspections of said construction on their property at any reasonable time until such time a Zoning Certificate of Compliance is issued. No Zoning Certificate of Compliance will be issued until the construction is complete and has been inspected to ensure compliance with the Zoning Resolution. _____ Applicant initials

Applicant Signature Application Name (Print) Date

For Zoning Office Use Only

Date Application received: _____ Date Action taken on Application: _____ Approved Denied
Total Fees received: \$ _____ Township Zoning Fees received: \$ _____ DESC fees received: \$ _____
If Denied, Reason for Denial: _____

Zoning Inspector