BERKSHIRE TOWNSHIP ZONING OFFICE

1454 Rome Corners Road

Galena, Ohio 43021

740-965-2992, Ext. 1

Berkshire.zoning@gmail.com

www.berkshiretwp.org

For Township Use			
Application #			
Date received			
Township Fee \$ Make Check Payable to Berkshire Township			
Zoning Cert. Issued Date Number			
Certificate forwarded to applicant: mail in person			

APPLICATION FOR BERKSHIRE TOWNSHIP ZONING CERTIFICATE TYPE OF WORK: (circle which applies) New Home, Building, Garage, Accessory Building, Addition, Pool. Deck or Change of Use

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Applicant	Contact Person		
Address of applicant			
	State		
	Email		
Name of Property Owner			
	State		
Phone	Email		
Location/address of property			
Parcel number(s)			
	Current use		

ITEMS REQUIRED FOR A COMPLETE APPLICATION:

- Check made out to Berkshire Township for **Applicable Fee** (see Berkshire Township Zoning Fees sheet online at http://www.berkshiretwp.org/berkshire-township-zoning-laws.html) for complete fee list
- Letter of Septic Compliance (Non-sewered lots only) from the Delaware Health District.
- Attach a plot plan showing boundary lines, existing structures, driveways, proposed structures and front, rear, and side yard setbacks. Include easements, flood plain data (if applicable) and accurate structural dimensions at the ground.

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

All proposed construction for which a zoning certificate is issued shall be started within six months of issuance of a permit. Applicant and property owner(s) certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the requested zoning certificate. Applicant agrees to be bound by the provisions of the zoning resolution of Berkshire Township and understands that any deviation from such resolution will result in the maximum penalty allowable by law.

Applicant:	Date:		
Property owner(s)	Date:	Form:	