

1454 Rome Corners Road Galena, Ohio 43021 740-965-2992 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 ZONING CERTIFICATE

TYPE OF WORK: (circle one) New Home, Building, Garage, Accessory Building, Addition, Pool, Deck or Change of Use

Contact person			
State			
Email			
Address of Property Owner			
State			
Email			
Location/address of property			
Parcel number(s)			
Current use			
	State		

ITEMS REQUIRED FOR A COMPLETE APPLICATION:

- Check to Berkshire Township for Applicable Fee (see Berkshire Township Zoning Fees on our website under Zoning)
- 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.
- Letter of review and approval (if applicable) from your Home Owners Association.

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: