Application for Zoning Permit

Liberty Township, Fairfield County, Ohio

Application Numb	er

The undersigned is applying for a Zoning Permit for the purpose(s) 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 showing the actual dimensions and locations of existing buildings on the lot and the dimensions and locations of proposed buildings/alterations.

1.	Name of Property Owner: Property Address:		
	Mailing Address (if different than property		
	Phone Number:	Email Address:	
2.	Parcel Number:	Subdivision:	Property presently zoned:
3.	Estimated cost of project: \$		
4.	Total living floor space: sq.	Water Permit Number:	: Depth: Height:
	[] Sign / Billboard [] Accessory St [] Above-ground Pool [] In-ground Po	tructure/Addition [] House Addition ool (requires fence permit on this permi Height: Length: Loading berths:	t or prior permit #) Width: Height:
ma wit cor Cer pre	by be required from utilities or other regulator th their regulations. Further, the Applicant to tompleted within two and one-half (2 ½) yound to a reasonable number of inspections or tificate of Compliance is issued. It is unlawfermises created, erected, changed, converted.	ory agencies and it is their responsibility understands this permit is void if the waters. By signing this permit, the Applicator said construction on their property a ful and considered a Zoning Violation to ed, altered or enlarged in its use or struction of Compliance will be a considered of Compliance will be considered.	Applicant understands that additional permits to contact the appropriate agencies and complyork is not commenced within one (1) year or is not gives permission for the Zoning Inspector to any reasonable time until such time a Zoning use or occupy any portion of a Building and/octure until a Certificate of Zoning Compliance is issued until the construction is complete and plicant's initials
Ap	plicant's Signature	Applicant's Printed Name	 Date
**	************	***********	***********
		For Zoning Office Use Only	
Da	te Application received: Da	ate Action taken on Application:	[] Approved [] Denied
To	tal Fees received: \$ To	ownship Zoning Fees received: \$	DESC fees received: \$
If C	Denied, Reason for Denial:		

Zoning Inspector

Rev. 12/2020