APPLICATION FOR ZONING PERMIT

(Allow 3 Business Days to Process)

ZONING PERMIT NO.

AMHERST TOWNSHIP 7530 OBERLIN ROAD ELYRIA OHIO 44035-1904 ZONING INSPECTOR: (440) 988-5894

"COMMERCIAL" BUILDINGS & ADDITIONS

The undersigned hereby applies to Amherst Township, Lorain County, Ohio, for a Zoning Certificate for the following use to be issued on the basis of the representations herein contained, all of which the applicant swears to be true. The applicant understands this Zoning Permit shall expire and <u>shall</u> be revoked if work has not begun within 6 months and zoning fees are <u>NOT</u> refundable. Construction must be completed in 18 months or a new permit is required.

LANDOWNERS NAME							
MAILING ADDRESS/CITY							
PHONE(S) [H =HOME, C =CELL, W =WORK]							
LOCATION OF PROPERTY							
PERMANENT PARCEL NO. <u>05</u> – <u>00</u> – _							
ZONING DISTRICT:							
BUILDER'S NAME							
ADDRESS/CITY							
PROPOSED USE OF PROPERTY:							
EXISTING USE OF PROPERTY:							
 EXISTING HOUSEHOLD SEWAGE TR IF YES, Lorain County Public Health COPY OF SITE PLAN REVIEW APPRO OHIO COMMERCIAL PERMIT COPY OF SEWER TAP PERMIT COPY OF DRIVEWAY/ACCESS PERMIT [CHECK ONE] STATE ROUTE	"PROPERTY IMPROVI DVAL DATED DATED DATED IIT DATED COUNTY ROAD	EMENT APPLICATION"	IS REQUIRED				
(ACREAGE =) SET BACK FROM ROAD RIGHT-OF-WAY REAR YARD CLEARANCE =F MAXIMUM BUILDING HEIGHT IS 35 FEET		LEFT SIDE YARD = RIGHT SIDE YARD =					
• BUILDING: (WIDTH =FT) (NO. OF STORIES =) (1 ST LEVI (3 RD LEVEL =SQ FT) (GARAC (TOTAL =SQ FT)	EL =SQ FT) GE =SQ FT)	(2 ND LEVEL = (DECK/PATIO/PORCH = _	SQ FT) SQ FT)				
AMOUNT OF FEE = \$	CHECK #	DATE PAID					

_____ DATE:

SITUATION PLAN

REQUIRED! – ATTACH A SKETCH OF THE LOT AND BUILDING -- SHOW MAIN ROAD OR STREET AND EXISTING BUILDINGS, PROPOSED CONSTRUCTION WITH ALL DIMENSIONS AND INDICATE THE DIRECTION AS TO NORTH. GIVE DISTANCES FROM BUILDINGS TO LOT LINE, ROAD RIGHT-OF-WAY LINES AND TO OTHER BUILDINGS ON THE SAME LOT.

NOTE:

WHEN A PROPOSED SOIL-DISTURBING ACTIVITY ON LAND USED OR BEING DEVELOPED, EITHER WHOLLY OR PARTIALLY, FOR NON-FARM RESIDENTIAL, CONSISTING OF ONE OR MORE CONTINUOUS ACRES OF LAND OWNED BY ONE PERSON OR OPERATED AS ONE DEVELOPMENT UNIT FOR THE CONTRUCTION OF NON-FARM BUILDINGS, STRUCTURES, UTILITIES, RECREATIONAL AREAS OR OTHER LIMITED NON-FARM USES, THE OWNER OF SAID LAND SHALL PREPARE AND FILE WITH THE ADMINISTRATOR AN EROSION AND SEDIMENT CONTROL (**ESC**) PLAN. AREAS OF LESS THAN ONE CONTINUOUS ACRE SHALL NOT BE EXEMPT FROM COMPLIANCE WITH ALL OTHER PROVISIONS OF THESE RULES AND PER **ORC 307.79**

DOES THIS STRUCT	ΓUF		ΕA	N EROSION AND SEDIMENT CONTROL PLAN (ESC
PLAN)?		YES		NO

IF "YES" – THE ESC PLAN SHALL BE SUBMITTED TO THE LORAIN SOIL AND WATER CONSERVATION DISTRICT (**SWCD**) ADMINISTRATOR OF THE ESC RULES FOR APROVAL THIRTY (30) WORKING DAYS PRIOR TO ANY SOIL-DISTURBING ACTIVITY AT THE PROPOSED SITE [SEE NOTE ABOVE]

IT IS THE **RESPONSIBILITY OF THE PROPERTY OWNER** NOT TO PLACE ANY STRUCTURE WITHIN A 100-YEAR FLOOD ZONE AS IDENTIFIED BY FEMA ON THE LATEST APPROVED FLOOD PLAIN MAPS, AND TO COMPLY WITH ALL DEED RESTRICTIONS.

Important Notice to All Applicants

Applicable zoning law within this jurisdiction requires zoning permits to be obtained through this office for the real-property-use for which you have applied. Such use is allowable only within the district designated for each use. You are being granted a zoning permit for this general use within the jurisdictional district designated for such use.

This permit serves only to verify that you, as the permittee, have complied with the requirement of obtaining this permit. The granting of this permit in no way relieves the permittee from obtaining any other necessary permit approvals as might otherwise be required under federal, state and local law; nor does it authorize activities conducted on the premises that are otherwise unlawful.

THE ACCEPTANCE OF THE PERMIT HEREIN APPLIED FOR SHALL CONSTITUTE AN AGREEMENT ON MY PART TO ABIDE BY THE CONDITIONS HEREIN CONTAINED AND COMPLY WITH ALL RESOLUTIONS OF THE TOWNSHIP OF AMHERST AND THE STATE OF OHIO RELATING TO THE WORK TO BE DONE THEREUNDER, AND SAID AGREEMENT IS A CONDITION OF SAID PERMIT.

PRINTED NAME OF APPLICANT _____

UPON THE BASIS OF THE ABOVE APPLICATION, THE STATEMENTS WHICH ARE MADE A PART THEREOF, THE PROPOSED USAGE IS FOUND (TO BE) (NOT TO BE) IN ACCORDANCE WITH THE TOWNSHIP ZONING RESOLUTION AND IS HEREBY (APPROVED) (NOT APPROVED) FOR THE FOLLOWING DISTRICT:______.

DATE OF APPROVAL	DATE OF DENIAL
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REMARKS: ____

SIGNATURE OF AMHERST TOWNSHIP ZONING INSPECTOR

• Work must begin within 6-months and must be completed within 1-1/2 years from the date of issuance of this permit.