Council:

Ariel Isaacs Dottie Scott Krissy Kauf Tina Killion Tom Dilgard Betty Brown **Mayor:** John R. Benshoff

Fiscal Officer: Leighanna Cawrse Village Administrator/ Zoning Inspector: Richard Brown



## VILLAGE OF BAILEY LAKES GENERAL ZONING PERMIT APPLICATION

OWNE	ER / APPLICANT IN	FORMATION:								
Property or Business Owner			Phone Number	Email						
Street Address			City	State	Zip Code					
Name of Applicant (if different from Owner)			Phone Number	Email						
Property	/ Project Address		City	State	Zip Code					
ZONING PERMIT CATEGORY:			PLAN/DRAWING:							
PRO	PERTY TYPE									
	Residential	☐ New Construction								
	Commercial	☐ Addition								
		☐ Alteration / Repair								
		Demolition								
CHEC	K PERMIT(S) APPL	.IED FOR:								
PER	MIT TYPE									
	Sign Permit	☐ Temporary Use								
	Residence	□ Demolition								
	Utility Building	☐ Deck/Porch								
	Garage	☐ Car Port								
	Lot Split	☐ Variance								
	Fence	☐ Shed								
	Other									
OHIO LAW REQUIRES ALL EXCAVATIONS <u>MUST</u> BE REGISTERED IN ADVANCE WITH THE OHIO UTILITIESPROTECTION SERVICE (O.U.P.S) @1-800-362-2764 OR 811										
APPLICANT SIGNATURE										
I agree to comply with the Ordinances of the Village of Bailey Lakes and the conditions of this permit, and certify that the above information is accurate.										
Applicant/Agent Signature Date Filed										
☐ Check if 501(c)(3) or other Non-Profit Organization										

*** OFFICE USE ONLY ***											
LOT NUMBER(S) PERMIT		DATE OF HEARING	DATE APPROVED		PERMIT NUMBER						
		APPROVED -	COUNTY PROPERTY ID#	FEE PAID	AUTHO	RIZED BY					
		DENIED		\$							

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