



Marion Township Zoning

PO Box 79

Marion, Ohio 43301

Mark McCleary – Zoning Inspector

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ZONING APPLICATION

Application date: ____/____/____

Application is hereby made by: _____
PRINT Name of Owner or Owner's Agent

For a zoning permit to occupy, use, erect and/or alter the premises described below. The plot plan in the attached sketch and the representations therein contained are made a part of this application. In reliance upon which, and as an inducement therefore, the Township of Marion, Marion County, Marion, Ohio is requested to issue a zoning permit in accordance with the following fee schedule:

Cost of Construction Permit Fee:

- | | |
|---|-------------------------------------|
| • Appeal process to the Board of Zoning Appeals | \$300.00 plus expenses |
| • Re-Zoning Request (Resident and Non-Resident) | \$300.00 |
| • Site Review Fee | \$200.00 |
| • Occupancy Permit | \$100.00 |
| • "Accessory" Home Structure less than 1,000 sq.ft. | \$100.00 |
| • Swimming Pool (in-ground or above-ground) | \$100.00 |
| • Residential Deck or Porch addition | \$50.00 |
| • Fence | \$50.00 |
| • Storage Shed (larger than 10' x 10') | \$50.00 |
| • Temporary Sign | \$50.00 per face |
| • Permanent Sign | \$200.00 per face |
| • Billboard sign | \$200.00 per face |
| • Replacement of current sign | \$200.00 per face |
| • Residential (new construction) | \$300.00 plus ¼% of total project |
| • Cellular Tower Installation Fee | \$2,500.00 |
| • Commercial / Business less than \$1 million | \$1,000.00 plus ¼% of total project |
| • Commercial / Business over \$1 million | \$2,500.00 plus ¼% of total project |
| • Commercial Building Demolition | \$2,500.00 plus ¼% of total project |
| • Medical Marijuana Cultivation, Processing or Dispensaries | \$5,000.00 plus ¼% of total project |

Type of Permit:

- Residential
- General Commercial
- Industrial
- Sign
- Temporary Sign

General Information for Permit:

- Cost of Construction: \$ _____
- Permit Fee: \$ _____
- Purpose of occupancy or use: _____
- # of Stories: _____ # of Families: _____
- Width: _____ Length: _____ Height: _____
- Lot #: _____ House #: _____
- Street: _____

NOTE: 1. A permit will not be issued unless an address is listed.
 2. Failure to obtain a Zoning permit will result in a double (2x) charge of the listed fee and potential removal of the structure.

Certification of Applicant

It is understood and agreed by this applicant that any error, misstatement or misrepresentation of any material fact, either with or without intention on the part of the applicant, such as might, or would operate to cause a refusal of the permit, or any material alteration of change in this accompanying plans made subsequent to the issuance of a permit in accordance with the application without the approval of the Township of Marion, shall constitute sufficient grounds for the revocation of such permit. It is further certified that the premises for which the application is made is not now being occupied or used contrary to the Zoning restrictions or agreements, which impose greater restrictions than those, imposed by the Zoning Resolution.

Printed name of Applicant: _____

Signature of Applicant: X _____

Current address of applicant: _____

Numeric

Street

Apt #

City

State

Zip Code

All applications **MUST** be returned in hard copy to **MARION TOWNSHIP ZONING, PO Box 79, Marion Ohio, 43302**. Checks to be made out to **MARION TOWNSHIP**.

To Be Completed by Zoning Inspector Date Granted or Denied : ____/____/____

GRANTED - Permit # : _____

DENIED - Reason:

Signature of Zoning Inspector: X _____

Project Sketch below (attach additional pages if necessary): **NOTE:** *You must show proposed and existing buildings, lot lines (clearly marked), streets or roads (in feet), proposed parking areas and driveways. You must call our Zoning Inspector upon completion of foundation of said structure. Set back requirements will be checked at this time to ensure compliance with the Code.*