SCHEDULE VII - PERMIT FORM EXAMPLES

SCHEDULE VII PERMIT FORM EXAMPLES

TOWN OF ORANGEVILLE CERTIFICATE OF NON CONFORMING USE

In accordance with Article VII of the Zoning Law of the Town of Orangeville, the lawful use of land or buildings existing at the date of adoption of the Zoning Law may be continued although such use or building does not conform to the regulations specified by the Zoning Law for the zone district in which such land or building is located. A non conforming use must be maintained in full compliance with Article VII of the Town of Orangeville Zoning Law.

Property Owner:				4	<u>L</u>	
Address:	(City)		(State)		Zip Code)	-
	(Oily)		(Otale)	Ι,	ZIDOUE)	
Phone: (
Zoning District of Pi	roperty: 🗆 LDD 🗆	MDD	□ CRĐĐQ N	I-HEL C	ĴÎ □P-B	
Description of the N	lon Conforming Use:	□В	uilding 🗆 Jan	d 🔰		
		<u> </u>		<u> </u>		_
*** ** Photos N	Must Be Attached Doo	cumentir	ig the Existing N	on Conform	ning Use ****	.
					J	
******	*******	*****	******	*******	********	**
A Certificate	of Non Conformit	ng Use	s hereby issu	ed for the	above describ	bed
non conforming us	se It does hotreli	eve the	certificate hol	lder of the	responsibility	y of
complying with thi	e balance of the To	owin of	Orangeville Z	oning Lav	v.	
l hereby cer	fify that I have read	d evam	ined and und	aretand th	at this cortific	ata
docume <u>n</u> ts the no	n conforming use	occurri	ng on my prop	perty and	know the same	ate e to
be true, correct an	d to the best of m	y know	ledge.	-		
Signature of	Certificate Holder		Signature of 2	Zonina Off	icer	
	_					
Print Name/	Γitle	-	Print Name/T	itle		
Dated: <u>*</u>			Dated:			
******	******	*****	*******	******	******	**
	<u>For</u>	· Office L	se Only:			
СОЪ	IES: ☐ Certificate Ho	older [Zoning Officer	□ Town C	lerk	

TOWN OF ORANGEVILLE CERTIFICATE OF USE APPLICATION

In accordance with Article III, Section 302(C) of the Zoning Law of the Town of Orangeville, it is unlawful to use or occupy or permit the use of occupancy of any building or premises, or both, or part thereof hereafter created, changed, converted or wholly or partly altered in its use until a Certificate of Use shall be been issued by the Zoning Officer stating that the proposed use of the building or land conforms to the requirements of the Zoning Law of the Town of Orangeville.

Application Date: Business Operator/Owner: Business Address:	Application No.:			
Business Phone: ()	(State) (Zip Code) Zoning Classification of Property:			
Description of type of Business:				
☐ Office ☐ Home Office Total Sq. Ft. of Residence: Total Sq. Ft. Dedicated to Busine	□ Retail □ Warehouse □ Wholesale □ Wof Non-Resident Employees: □ ss: # of Parking Spaces Provided: □			
A Certificate of lese, issued based upon the above information, authorizes the above listed type of business and no other. It does not relieve the designated permit holder of the responsibility of obtaining the approvals of other applicable state and county agencies.				
I hereby certify that I have read, examined and understand this application and				
know the same to be true correct and to the best of my knowledge.				
Signature of Applicant: Print Name/Title:	Date:			
The state of the s				
*************	*********************			
	For Office Use Only:			
Application Reviewed: ☐ Yes ☐ No	By: Date:			
Application Approved: ☐ Yes ☐ No	By: Date:			
Application Fee Paid: ☐ Yes ☐ No Comments:				

TOWN OF ORANGEVILLE SPECIAL USE PERMIT APPLICATION

In accordance with Article III, Section 302(D) of the Zoning Law of the Town of Orangeville, upon written direction of the Planning Board, the Zoning Officer is hereby empowered to issue a special use permit as provided for by the Zoning Law of the Town of Orangeville. A special use permit shall authorize only one (1) particular special use. The special use permit shall expire if the use shall cease for more than one (1) year for any reason.

Application Date: Applicant Address:	A	pplication No.:	\$
Address: (City) Home Phone: Property Owner: Property Owner's Address: (City) Property Owner's Phone: Zoning Classification of Property: Reasons for Special Use Permit re			Lip Code) Lip Code)
Requested length of time/hours of Any signs/structures being used:	operation: □Yes □No If yes, des	cribe:	
***********		********************	*****
A Special Use Permit, issue the above-listed special use designated permit holder of their applications.	requested and no other	. It does not relieve aining the approvals	the
hereby certify that I hav know the same to be true, corn	e read, examined and ur ect and to the best of r	nderstand this appli ny knowledge.	cation and
Signature of Applicant:		_ Date:	
Print Name/Title:	·	-	. •
***********	**********	********	******
	For Office Use Only:		•
Application Reviewed: ☐ Yes ☐ No	By:	Date:	·
Application Approved: Yes No	By:	Date:	
Application Fee Paid: ☐ Yes ☐ No Comments:	11 yes, amount: \$		

TOWN OF ORANGEVILLE ZONING PERMIT APPLICATION

In accordance with Article III, Section 301 of the Zoning Law of the Town of Orangeville, the Zoning Officer is empowered to issue a zoning permit for any plans regarding the construction or alteration or demolition of any building or part of any building, or the change in the use of any land area or part thereof, where it is determined that such plans are not in violation of the provisions of the Zoning Law of the Town of Orangeville.

		and the second s
Application No.:	Application Date: _	
Tax Map No.:		
Owner:	Phone Number:	
Address:		
Address:(Street)	(City) (State	(Zip Code)
Present Use of Land:		nts:
Type of Work: ☐ Garage ☐ Sign ☐ Fence ☐ Barn	☐ Driveway ☐ Sidewalk ☐ Porch/Deck ☐ Parking L	☐ Home/Addition ot ☐ Other:
I propose to do the following work:		
Plans (required) Attached: □Yes □N Survey Map (required) Attached □Y	lo Number of Sheets: _ 'es □No	Value of Work: \$
A Zoning Permit, issued ba above-listed type of work a permit holder of the rest applicab	sed upon the above informed no other. It does not reconsibility of obtaining the state and county agenci	elieve the designated approvals of other
hereby certify that I have re know the same to be true, correct a	ead, examined and underst and to the best of my know	and this application and ledge.
Signature of Applicant	·	Date:
Print Name/Title:		
*++********************	*********	*****
₹	For Office Use Only	
Application Reviewed: Application Approved: Ves No 1	Bv:	Date:
rependation reproved. Listes Listed	ωy.	Date:
Application Fee Paid: ☐ Yes ☐ No Comments:	If ves amount: \$	
***********	•	
	☐ Zoning Officer ☐ Assessor	

TOWN OF ORANGEVILLE TEMPORARY USE PERMIT APPLICATION

In accordance with Article III, Section 302(B), and upon written direction of the Planning Board of the Town of Orangeville, the Zoning Officer is hereby empowered to issue a temporary use permit. A temporary use permit shall only be effective for a period of not to exceed six (6) months. Said permit may be extended by the Zoning Officer, not more than once, for an additional period not to exceed six (6) months.

Applic	ation Date:	Application No.:
Tax M	ap No.:	Zoning Classification of Property:
Owner		Phone Number.
Addre	ss:	City, State, Zip:
1.	State the specific temporary use requ	uested and why tis needed:
2.	Does the request involve the temp construction of a permanent residence	orany use of mobile or manufactured home during ce? I Yes I No
	Is the requested use intended to be	
4.	Specify the time period requested	for the temporary use, including the starting date
$ \Delta T_c$	emporary Leo Pormit Voge of hoos	
7 2	hove listed type of tombers	ed upon the above information, authorizes the
"	upplication for accessor to anita	and no other. The applicant is aware that
iceus	pplication to weeks ally be mits f	nust be made within thirty (30) days of the
15502	ince of the temporary usespermit	and that failure to apply for necessary permits
	within that time renders the	temporary use permit null and void.
<u>.</u>	Lhereby certify that I have read, o	examined and understand this application and
know	the same to be true, correct and	to the best of my knowledge
		we are not or my knowledge.
Signati	ire of Applicant:	Date:
Print N	ame little:	Date.
		
******	****************	****************
	·	ffice Use Only:
Applicat	tion Reviewed:	Dote:
Applicat	tion Approved: Yes No By:	Date: Date:
Applica	tion Fee Paid: ☐ Yes ☐ No If yes, an	mount: \$
Comme	nts:	
*****	************	*****************
		cer Planning Board Chairman D Town Clark