

Village of Moscow

30 Wells St
PO Box 93
Moscow, OH 45153

APPLICATION FOR ZONING PERMIT



APPLICANT INFORMATION

NAME _____

ADDRESS _____

TELEPHONE (Home) _____ (Work) _____

PROPERTY INFORMATION

OWNER'S NAME _____

PROPERTY ADDRESS _____

PROPERTY USE: (such as Residential A; Residential B; Local Business; General Business)

Existing _____

Proposed _____

NOTE: If proposed use is business or industrial please include a detailed description of the nature of the business or industry (Attach separate sheet if necessary)

PROPOSED CONSTRUCTION

New Building	Addition	Repair	Change of Use
Accessory Building	Fence	Driveway	Swimming Pool
Sign	Other	_____	

SUPPORTING INFORMATION

A. Two (2) sets of plans, drawn to scale, that includes the following:

1. Plot plan showing size and shape of lot with all dimensions; size and location of all existing and proposed buildings and structures
2. Complete floor plan and elevations of all proposed structures (where applicable)
3. Location, size and details of all signage (where applicable)
4. Location and quantity of parking spaces (where applicable)

B. Fee as certified by Zoning Administrator

NOTE: The boundaries of all proposed structure(s) must be clearly marked with flags, paint or similar devices that will show the extent of any additions, alterations, etc.

The applicant hereby certifies that all information and attachments are true and correct. The applicant further understands that this permit shall expire one (1) year after the date of issuance, unless work has begun, or two and one-half (2 ½) years unless project is substantially completed.

Date

Signature of Applicant

Telephone 513.553.6870

Fax 513.843-5815