



Fiscal Officer
Street Department

Parks & Recreation
Zoning Department

John M Carman, Mayor

Zoning Permit Application

(937) 783-4702 Ext. 11

CONSTRUCTION SITE INFO

Commercial _____ Residential _____

Address of Construction:

Mailing Address and Names:

Phone Number: _____

TYPE OF ZONING REQUEST

New _____ Remodel _____ Addition _____

Swimming Pool _____ In Ground _____ Above Ground _____

Moving Buildings _____ Accessory Building _____ Carport _____

Cutting Curbs _____ Driveway _____ Sidewalk _____ Deck _____

Open Cutting of Streets _____ Fence _____ Culverts _____ Expanding of Street Parking _____

Shed _____ Garage _____ Pole Building _____ Other _____

SIZE OF PROPOSED STRUCTURE _____

STRUCTURE HEIGHT _____

Lot Width _____ Lot Depth _____ # of Acres _____

Back _____ Left Side _____ Right Side _____

The applicant hereby certifies that all information and attachments to this application are true and correct. The applicant is required, in addition to the information requested on this form, to submit a plan showing the actual dimensions and shape of the lot, sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed building or alterations.

Agent / Owner Name: _____

Signature: _____

Home Phone: _____ Cell Number: _____

OFFICE USE BELOW

Planning Commission Signed: _____

Date Approved: _____ Date Denied: _____

Inspector: _____

Zoning Class: _____ Permit Number: _____

Comments:

The permit is valid for 12 months from the date issued. The project must start within 60 days from the date issued; otherwise, an additional fee will be required.

All residential and commercial buildings will require an electrical and building permit from the Clinton County Building Department. Office # 937-382-3335

APPROVAL: _____

DATE: _____

Size of Electric Desired- In Amperage _____

Type of Heat _____ If Electric, Type of System _____

IS Underground Electric Service Desired? YES, _____ NO _____

Type of Water Service Desired _____ Size _____

Type of Sewer Desired _____ Size _____

Will Easement Be Needed to Supply Services: YES, _____ NO _____

THE ABOVE REQUESTED UTILITIES:

Available _____ Not Available _____

Comments:

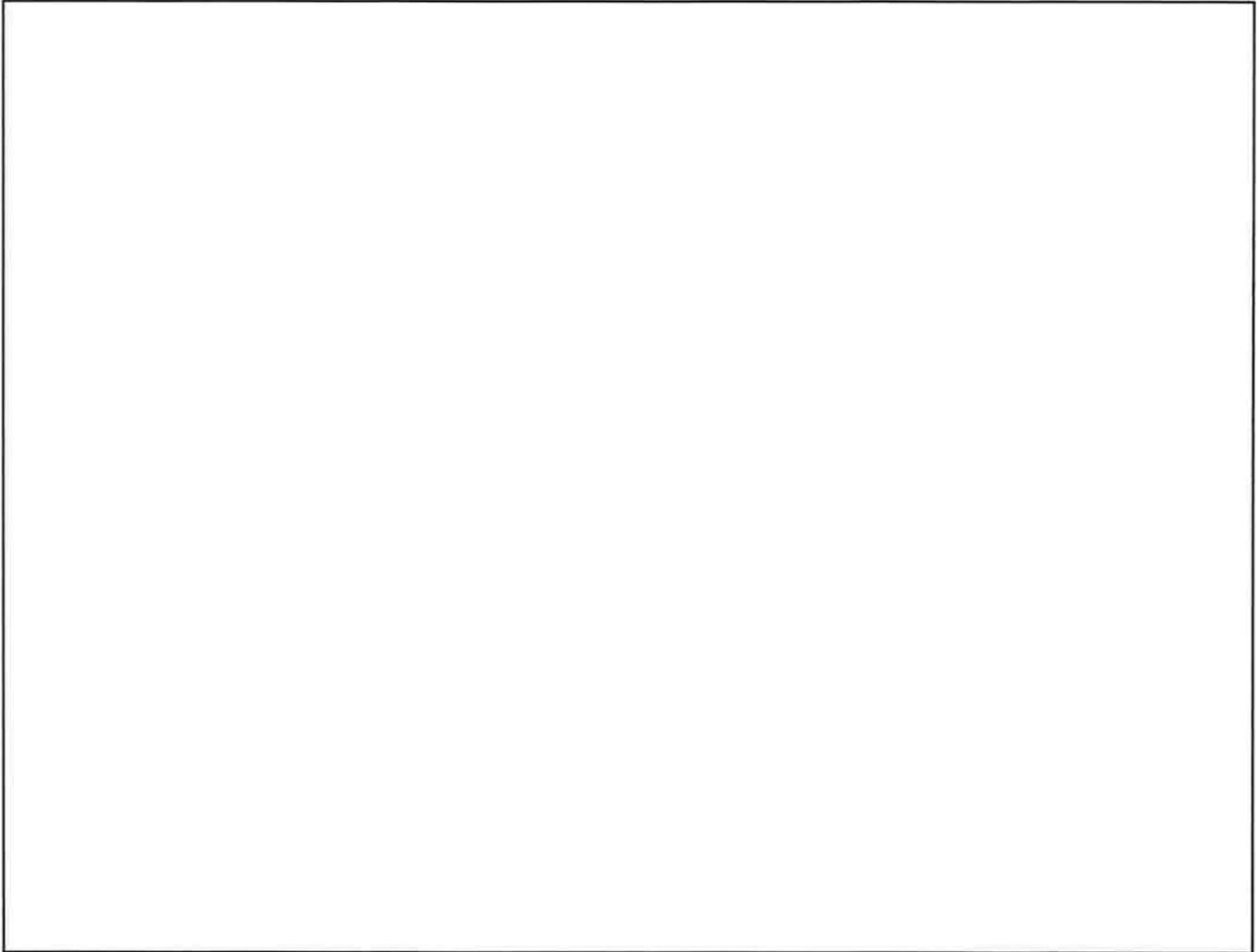
APPROVED: _____

DISAPPROVED: _____

UTILITIES DIRECTOR: _____

1. Show streets and give names (front-rear) mark alleys.
2. Give all dimensions to streets or property lines.
3. Show changes proposed- new work etc.

DRAWING:



I HAVE RECEIVED A COPY OF THE ORDINANCE THAT ACCOMPONIES THE PERMIT REGULATIONS:

Signature: _____ Date: _____