

NO. _____

FEE _____

VALUATION _____

DATE _____

**CITY OF ONTARIO, OHIO
APPLICATION FOR ZONING PERMIT**

1. APPLICANT'S NAME _____
ADDRESS _____
_____ Ph. _____

2. OWNER'S NAME _____
ADDRESS _____

3. LOCATION OF PROPERTY _____ LOT _____

4. ZONING DISTRICT _____

5. APPLICANT HEREBY APPLIES FOR A ZONING PERMIT FOR THE FOLLOWING USE:

_____ ONE-FAMILY DWELLING UNIT	_____ TWO-FAMILY DWELLING UNIT
_____ MULTI-FAMILY DWELLING UNIT	NO. OF UNITS _____
_____ ACCESSORY BUILDING (DESCRIBE)	_____
_____ OTHER RESIDENTIAL USE	_____ BUSINESS
_____ OFFICE USE	_____ WAREHOUSE
_____ INDUSTRIAL USE	_____ OTHER USE
DESCRIBE _____	

PARCEL DESCRIPTION

FRONTAGE _____ DEPTH _____ AREA _____

BUILDING DESCRIPTION

WIDTH _____ DEPTH _____ No. of Stories _____

SETBACKS

SIDE _____ SIDE _____ FRONT _____ REAR _____

SEWER SYSTEM

PUBLIC OR EPA APPROVED _____ PRIVATE _____

APPLICANT'S SIGNATURE

PLANNING COMMISSION APPROVAL (DATE) _____

BASED UPON THE INFORMATION CONTAINED IN THIS APPLICATION AND THE ACCOMPANYING SITE PLAN, A ZONING CERTIFICATE IS APPROVED / DENIED.

REASON FOR DENIAL _____

DATE _____

ZONING INSPECTOR

APPLICANT ACKNOWLEDGES THAT CONSTRUCTION OR USE OF THIS LAND IS AUTHORIZED ONLY IN ACCORDANCE WITH THE REPRESENTATIONS ON THIS APPLICATION AND ACCOMPANYING SITE PLAN AND MUST CONFORM WITH ALL PROVISIONS OF THE ONTARIO ZONING ORDINANCE.

SEPARATE PERMITS MAY BE NEEDED FROM THE RICHLAND COUNTY CODES AND PERMITS DEPARTMENT, RICHLAND COUNTY HEALTH DEPARTMENT AND THE CITY OF ONTARIO WATER DEPARTMENT.