

COMMERCIAL ZONING PERMIT APPLICATION

PARCEL NO. _____

Complete all areas of this form and submit by mail, email, or in person:

- * 2 copies applic form
- * 3 - 11" x 17 "site plans
- * DOES/EPA copy
- * 1 set Building plans
- * City road opening/driveway permit

Project Address:	Parcel No.:
Project / Business Name:	
Project Manager/Contact:	Phone:
Contractor / Applicant:	Phone:
Contractor / Applicant Address:	City State ZIP
Contractor Email:	Cell:
Property Owner Name, if not applicant:	Phone:

ZONING DISTRICT:

R-2 B-1 **B-2** B-3 **B-4** B-5 **I-1** _____

FRONT SETBACK FROM RIGHT-OF-WAY TO FOUNDATION

PZC APPROVAL: Date: _____ No. _____

RIGHT SETBACK - *PROPERTY LINE TO FOUNDATION*

BZA VARIANCE: Date: _____ No. _____

LEFT SETBACK - *PROPERTY LINE TO FOUNDATION*

Variance granted: _____

REAR SETBACK - *PROPERTY LINE TO FOUNDATION*

Check all that apply:

- NEW CONSTRUCTION** OVERHANG SIZE *FR* _____ in / *L* _____ in / *R* _____ in / *RR* _____ in
- ADDITION**
- STORAGE BUILDING** _____ WIDTH OF STRUCTURE
- ACCESSORY USE** ___ attached ___ detached _____ DEPTH OF STRUCTURE
- COU - Certificate of Use & Compliance** _____ OVERALL HEIGHT
 - Fence
 - Satellite Dish (18"+)
 - Standalone ATM
- DRIVEWAY** – new access to a public street
- TEMPORARY USE(S)**
 - _____ sub-ground, finished _____ 1st Floor
 - Constr trailer(s), dumpster(s) , equip storage _____ sub-ground, unfinished _____ 2nd Floor
 - Project signage – attach details, image(s), size(s) _____ Attached Accessory _____ 3rd Floor
 - OTHER:** _____

DOES or EPA APPROV: _____

Other : _____

CITY ROAD OPENING / APRON PERMIT: _____

TOTAL SQ FT _____

MUST OBTAIN BUILDING PERMIT: SUMMIT COUNTY DEPT. OF BUILDING STANDARDS 1030 E. TALLMADGE AVE. 330-630-7280
 LOCATED 2 MILES EAST OF THE RT. 8 EXIT.

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, AND CONSENTS TO AGENTS OF THE CITY ENTERING PREMISES FOR INSPECTION AND VERIFICATION OF INFORMATION SUBMITTED, AND IF THIS APPLICATION IS APPROVED, TO VERIFY CONFORMANCE TO REQUIREMENTS AND CONDITIONS OF SUCH APPROVAL.

_____ **I UNDERSTAND THAT I MUST CONTACT GREEN ZONING WHEN THE PROJECT IS STAKED FOR SETBACK INSPECTION AND I AM RESPONSIBLE FOR MAINTAINING THE APPROVED SETBACK THROUGHOUT PROJECT.**

 Applicant signature