

RESIDENTIAL ACCESSORY PERMIT APPLICATION PARCEL NO. _____

A Zoning Permit through this office is required for all structures over 30 square feet; a building permit through Summit County Dept of Building Standards is required for all accessory structures over 200 square feet. The property owner will ultimately be held responsible if permits are not obtained.

ACCESSORY USES: Complete areas of the application form relative to the specific project:
 * 3 site plans – 11 x 17 * 1 set building plans – 11 x 17 * 2 copies of application form

SEPTIC LOT APPROVAL:
 For septic lots, the **Summit County Health Department (SCHD)** requires an assessment of the septic system prior to issuance of a building permit by Summit County Building for any residential addition or construction of an accessory use.
This assessment is NOT REQUIRED for small garden-type sheds.

SETBACK REQUIREMENTS:
 Sheds & storage buildings: minimum of 5 ft from rear and side yard property lines

FEES:
 The fee for all Accessory Uses is \$75; checks should be made payable to *City of Green*. We also accept Visa & Mastercard debit & credit cards, and exact cash.

Project Address: _____ ZIP: _____ Lot No: _____ Subdivision: _____

Applicant: _____ Phone: _____

Applicant Address: _____ City/State/Zip: _____

Contractor, if not applicant: _____ Phone: _____

Contractor Address: _____ City/State/Zip: _____

Contractor Email: _____

Field Contact, if a problem would arise onsite: _____ Cell: _____

Property Owner Name, if not applicant: _____ Phone: _____

ACCESSORY USES: Setbacks are measured from the structure to the **nearest** property lines, and are relative to the specific project only, i.e. deck, shed, pergola, etc.

SUNROOM / PATIO ENCLOSURE _____ FRONT SETBACK - PROPERTY LINE TO FOUNDATION

GARAGE ___ detached ___ attached _____ LEFT SETBACK - PROPERTY LINE TO FOUNDATION

DECK SHED / STORAGE BUILDING _____ REAR SETBACK - PROPERTY LINE TO FOUNDATION

OTHER _____ RIGHT SETBACK - PROPERTY LINE TO FOUNDATION

Corner Lot? Yes No OVERHANG SIZE FR ___in / L ___in / R ___in / RR ___in

All Easements Shown on Site Plan? Yes No _____ WIDTH OF STRUCTURE

Creek, drainage area or wetlands on property? Yes No _____ DEPTH OF STRUCTURE

Health Dept Needed: Yes No _____ HEIGHT OF STRUCTURE

Approval Date: _____ TOTAL SQ FT: _____

TOTAL LOT SIZE (in square feet): _____ SF

% OF LOT COVERAGE: _____% (Percentage of lot covered by structures)

**% of lot coverage includes total sq ft of ALL accessory structures

BZA VARIANCE: Date: _____ No: _____ Variance granted: _____

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

THE UNDERSIGNED HEREBY CERTIFIES THAT THE INFORMATION IN AND WITH THIS APPLICATION IS TRUE AND ACCURATE, 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.

Applicant Signature: _____ Date: _____