Village of Bellville 142 Park Place Bellville, Ohio 44813 (419) 886-2245 Ext: 0

APPLICATION FOR ZONING PERMIT

PAID: AMT		_ CHECK	DATE	REC#	_
Date:	Applicant:				
Contractor Addre	ess:				
	<u> </u>				
Phone:					
Fed ID #:					
Property Owner:					
Address & Phone	:				
Location of Prope	erty:				
Zoning District:					

<u>SITE PLAN</u>: Attach an accurate site plan drawn to scale showing the exact location of all building(s) and accessory structures to be constructed, all existing buildings on the property with their dimensions, lot lines and any existing easements or right-of-ways on the property, any proposed division of the property, building setbacks from each property line, all existing and proposed parking with location of all entrances and exits and dimensions of all parking spaces, maneuvering lanes, drive widths, etc, all required greenbelts and landscaping.

Is any portion of the proposed property within a flood hazard zone per official Flood Insurance Rate Map, Community Panel #390604-001B last revised 9/2/1993? ____Yes ____No Will any building or accessory structure be located within a flood hazard zone? ____Yes ____No Applicant hereby applies for a zoning permit for the following use:

- ____One family dwelling unit
- _____Two family dwelling unit
- _____Multi-family dwelling unit (____Number of units)

Type of construction: Build on site____ Industrial____ Permanently placed manufactured home_____

_____Accessory building or use (describe):______

Residential use_____Industrial use_____

Other (describe):_____

Lot width: Front: _____ ft. Rear: _____ft. Lot depth: Left side: _____ ft. Right side: _____ft.

Building description: Width:____ft. Depth:____ft. Height:____ft. Stories: _____

Setbacks: Left side: ____ft. Right side: ____ft. Front: ____ft. Rear: ____ft.

Off-street parking spaces _____, parking lot entrances _____, exits _____

Water/sewer systems: Public_____ Private or EPA approved_____

Applicant or owner is responsible for contacting the superintendent of the water/sewer department for information on tap in permit(s), line locations, and metering. Water tap: _____ Sewer tap: _____ Total: _____

Unless construction begins within six (6) months from the date of issuance of this permit, or is not completed within eighteen (18) months, this zoning permit will be revoked.

NOTICE:

Applicant hereby acknowledges that construction or use of this land is authorized only in accordance with the representations on this application and site plan. Applicant must conform to all provisions of the Bellville Zoning Ordinance. Failure to conform may result in the issuance of a stop-work order or revocation of the permit. A separate permit will be needed from Richland County Codes and Permits Department and/or Richland County Health Department for all commercial business. An application for a permit must be completed for any and all construction in a flood hazard area. Approval of the Zoning Inspector, Street Superintendent, and Water/Sewer Superintendent shall constitute a valid zoning permit.

ABSOLUTELY NO CONSTRUCTION SHALL BEGIN UNTIL A VALID PERMIT IS OBTAINED.

Date	Signature of Applicant
Date	Signature of Homeowner
	APPROVAL/DENIAL OF ZONING APPLICATION
Name:	
Address:	
Zoning Appli	cation filed for:
ZONING IN	SPECTOR: Approved Denied
Comments ar	nd/or reasons for denial:

Date

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STREET SUPE	ERINTENDENT:	Approved	Denied			
	or reasons for denial:					
Date	te Signature of Street Superintendent					
WATER/SEWI	ER SUPERINTENI	DENT: Approved _	Denied			
Comments and/o	or reasons for denial:					
Date	Signature	f Water/Sewer Supe	rintendent			
01/11	Signature 0.	i water/Sewer Supe	Intendent			