

APPLICATION FOR ZONING CERTIFICATE

Sec. 519.16 O.R.C.

Parcel No. _____

Section _____

JACKSON TOWNSHIP, SANDUSKY COUNTY

To the Board of Township Trustees:

Date _____

The undersigned hereby applies for a Zoning Certificate for the following use, to be issued on the basis of the representations contained herein, all of which applicant says are true:

1. Location of property _____

2. Property owner _____

Address of land owner _____

3. Current Resident _____

4. Proposed use:

____ New construction ____ Business ____ Additions/Remodeling ____ Circle One: LB GB M

____ Sign Board-Size ____ Accessory building ____ Residence ____ # of families

____ Other (explain) _____

5. Sketch of lot, showing existing buildings and proposed construction or use for which application is made. (Fill in all dimensions and indicate North)

a. Front yard width _____ feet

e. Depth of lot from edge of road right of way _____ feet

b. Setback from edge of road right of way _____ feet

f. Building Dimensions:

c. Side yard clearance:
____ side _____ feet
____ side _____ feet

Current: Proposed:
Width _____ feet Width _____ feet
Depth _____ feet Depth _____ feet

d. Rear yard clearance _____ feet
Rear yard width _____ feet

g. Highest point of building above the established grade:
Present _____ feet
Proposed _____ feet

DRAWING AREA

North

If construction activity has not been completed within 24 months, the permit shall be automatically void and new application fee shall be required to the issuance of a new permit.

6. Number of stories _____ Basement _____ Usable floor space designed for use as living quarters, exclusive of basements, porches, garages, breezeways, terraces, attics, or partial stories:

First floor _____ Sq. Ft. Second floor _____ Sq. Ft. Off Street Parking _____ Sq. Ft.

OFFICIAL USE ONLY

Upon the basis of this application the statements in which are made a part hereof, the proposed usage is found to be in accordance with the Township Zoning Resolution and is hereby **approved** for the **AGRICULTURE, R-1, R-2, R-3, LB, GB, C, OR M Zone (Circle One).**

Fee paid \$ _____

Applicant _____

Zoning Inspector _____