

APPLICATION FOR ZONING PERMIT

Application No. _____

Property No. _____

Portage Township, Ottawa County, Ohio

To the Township Zoning Commission:

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 the applicant says are true,

1. Location of property _____
2. Section _____ Block _____ Lot _____ Subdivision _____
3. Name of Land Owner _____
Address _____
4. Proposed use (explain) _____

_____ New Construction	_____ Business
_____ Remodeling	_____ Manufacturing
_____ Accessory Building	_____ Sign Board Size
_____ Residence _____ No. of Families	_____ Other
5. Attach a plot plan of lot showing location of existing buildings and location of new buildings. Give exact measurements of building(s) and the distances from all lot lines. Provide the following information.
 - A. Main road frontage _____ feet.
 - B. Set back from **road right-of-way** _____ feet.
 - C. Side yard clearance Right _____ Left _____ feet.
 - D. Rear yard clearance _____ feet.
 - E. Depth of lot from **road right-of-way** _____ feet.
 - F. Dimensions of building: Width _____ feet. Depth _____ feet.
 - G. Highest point of building above the established grade line _____ feet.
6. Buildings: Use _____
 Number of floors _____ Basement _____
 usable floor space designed for use as living quarters, exclusive of basements, porches, garages, breezeways, terraces, attics or partial stories.
 First floor _____ square feet. Second floor _____ square feet. Additional floors _____ Square feet.
 Off street Parking _____ square feet.
7. Remarks: _____

This application must be accompanied with final blueprints showing the elevations and floor plans.

OWNER or OWNERS AGENT _____
Address _____

DO NOT WRITE BELOW THIS LINE

Filed with the Zoning Inspector _____ 20__

ZONING PERMIT

Upon the basis of Application No. _____, the statements in which are made a part hereof, the proposed usage is _____ found to be in accordance with the Portage Township Zoning Resolution and is hereby _____ for the _____ District.
Approved/Rejected

Mary T. Gardner, Zoning Inspector
Portage Township
2501 State Rd.
Port Clinton, OH 43452

Application received on _____, 20__
Application ruled on _____, 20__

Fee Paid: \$ _____

If permit is refused, the reason for the refusal _____

Show exact dimensions of Lot and any existing buildings and any projected buildings.
Give the exact measurements of buildings to side, front and rear yards.

