

Zoning Permit Review Application

Village of Williamsport
300 Ballard Ave, PO Box 1
Williamsport, Ohio 43164

Owner: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Applicant: _____ Phone: _____

Address: _____ City: _____ Zip: _____

Property Address: _____ Lot# _____

Zoning District: _____

Proposed Use: _____ Building Area: _____ Sq. Ft.

Setback: Front: _____ Ft. Rear: _____ Ft. Side: _____ Ft. Side: _____ Ft.

Structure Height: _____ Ft. Acres: _____ Lot Area: _____ Sq. Ft.

Percentage of lot to be covered by Structure: _____ %

Percentage of lot to be covered by Impervious Materials: _____ %

Request is for the following:	_____ Single Family Dwelling	_____ Alteration
_____ Addition	_____ Storage Shed	_____ Garage
_____ Commercial Building		_____ Swimming Pool
_____ Change in use (Commercial use only)		_____ Fence
_____ Sign	_____ Other	_____ Wall

The applicant shall submit two copies of a site plan drawn to scale. The site plan shall show actual dimensions of the lot including easements, the exact size and location of all existing and proposed buildings on the lot, and setback distances from buildings to property lines. No existing or new building shall be changed in its use in whole or in part until the Village of Williamsport Zoning Inspector has issued a Zoning permit. The Zoning Inspector shall have up to five working days to review the application and may consult technical agencies prior to approval of any permit. Applicant certifies that all information contained herein is true and accurate and is submitted to induce the issuance of the zoning permit.

Date: _____ Owner's Signature: _____

Print Name: _____

OFFICIAL USE ONLY

DATE RECEIVED: _____ DATE APPROVED: _____ PERMIT # _____

DATE REJECTED: _____

REASON REJECTED: _____

Zoning Inspector Signature: _____