



Application for Zoning Certificate

Date: _____

Application No. _____

_____ Township

_____ County

To the Board of Township Trustees:

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. Name of Land Owner: _____

Mailing address: _____

Phone: _____ E Mail: _____

3. Occupant: _____

4. Proposed use:

___ New Construction

___ Business

___ Remodeling

___ Manufacturing

___ Accessory Building

___ Sign Board—Size _____

___ Residence

___ Other _____

(explain below, use additional sheet if necessary)

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

A) Main road frontage _____ feet

B) Set back from side of road right of way _____ feet.

C) Side yard clearance:

_____ side _____ feet

_____ side _____ feet

D) Rear yard clearance _____ feet

E) Depth of lot from right of way _____ feet.

F) Dimensions of building: Width _____ feet Depth _____ feet

G) Highest point of building above the established grade _____ feet

9501 Jerusalem Road Curtice, Ohio 43412

419.836.8921

www.twp.jerusalem.oh.us



6. Building Use: _____

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 _____ square feet Second floor _____ square feet

Off street parking _____ square feet.

7. Remarks: _____

Witness:

Applicant:

DO NOT WRITE BELOW THIS LINE

Filed with the zoning Inspector _____, _____.
Month Year

Zoning Certificate

Sec.519.16.519.17 R.C.

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 Township Zoning Resolution and is hereby _____ for the _____ District.
(approved-rejected)

Township Zoning Inspector

Township _____ County

Date application received _____, _____.

Date application ruled on _____, _____.

Fee Paid \$ _____

If Certificate refused, reason for refusal _____

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