

ZONING PERMIT APPLICATION
FRANKLIN TOWNSHIP, MERCER COUNTY
ACCESSORY USE/ STRUCTURE

Permit# _____
Date filed: _____
Zoning District: _____

Principal use: _____

Address of property: _____

Lot# and subdivision: _____

Estimated cost of improvements: _____

Owner's name: _____

Owner's address: _____

Owner's phone: _____

Contractor: _____

Contractor's address: _____

Contractor's phone: _____

Type of accessory (check all that apply) Building Fence Parking lot
 Pool Home occupation, specify _____
 Other, specify _____

All applications **must** be accompanied by drawings showing:

- Actual lot dimensions
- Principal building dimensions
- Accessory building dimensions
- Location of accessory buildings
- Front, rear and side yard set backs
- Street
- Maximum building height
- Dimensions, surface and location of drive(s)
- Off-street parking (where applicable)

The applicant hereby certifies that all information on, and attached to, this application is true and correct. The applicant also declares that no part of the land involved in this application has been previously used to provide required yard space and/or lot area for another use or building. The applicant acknowledges that all construction will be in compliance with the Construction Standards of Mercer County and all applicable codes and grants access rights to this property to any zoning personnel for inspection purposes.

OWNER OR OWNER'S AGENT _____

SIGNATURE

In issuing this permit the Franklin Township acknowledges that the building and/or the use represented herein is in compliance with the Zoning Code of Franklin Township, Mercer County, Ohio. It is the responsibility of the property owner to make sure that the actual construction and use are as stated on this application and plan, and to assure compliance with any other applicable laws.

DIRECTIONS TO THE PROPERTY, FROM THE NEAREST HIGHWAY, MUST BE PROVIDED

This permit expires (6) months after its issuance unless construction has begun or in (2) two years if the project is not substantially completed. The decision as to "substantially completed" will be at the discretion of the Zoning Inspector.

Zoning Inspector _____

SIGNATURE

DATE

***IT IS THE RESPONSIBILITY OF THE OWNER OR CONTRACTOR TO NOTIFY THE ZONING INSPECTOR WHEN THE STAKES ARE PLACED AND WHEN THE FOUNDATION IS COMPLETE. NO CONSTRUCTION CAN BEGIN UNTIL THE FOUNDATION HAS BEEN INSPECTED.**

FOR OFFICIAL USE ONLY

Fee: _____ Paid _____ Check No. _____ (make check payable to: Franklin Township Trustees)

Conditional Use: _____ yes _____ no Abuts "R" District: _____ yes _____ no

Flood Plain _____, Panel _____ SFHA Permit _____ Date _____

(A Special Flood Hazard Area Development (SFHA) permit is required for construction in the flood plain, prior to the issuance of a building permit)

Easement encroachment: _____ yes _____ no

_____ Accessory building has 50% or less of the gross floor area of the principal structure. (Exemption: "A: Districts. Lots of (5) five acres or more.

_____ Shall not contain or be used as a dwelling unit.

Requirements checklist:	<u>Regulations</u>	<u>Application</u>	<u>Staked</u>	<u>Foundation</u>
Minimum front yard	_____	_____	_____	_____
Minimum side yard	_____	_____	_____	_____
Minimum rear yard	_____	_____	_____	_____
Maximum height	_____	_____	_____	_____
Maximum percent lot coverage	_____	_____	_____	_____
Off-street parking spaces	_____	_____	_____	_____

Application Review: _____ Stake Check: _____ Foundation Check: _____
Initials Date Initials Date Initials Date

_____ Grant _____ Deny

Comment: _____

