

**APPLICATION FOR ZONING PERMIT  
PLEASANT TOWNSHIP, FAIRFIELD COUNTY, OHIO**

Application No.....

The undersigned applies for a zoning permit for the following use, said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct. The applicant is required, in addition to the information requested on this form to submit plans, in triplicate and drawn to scale, showing the actual dimensions and shape of the lot, exact sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed buildings or alterations.

1. Locational Description: Subdivision Name .....  
 Section ..... Township ..... Range ..... Lot No. ....  
 (If not located in platted subdivision attach a legal description in triplicate)
2. Name of Owner .....  
 Mailing Address .....  
 Phone Number: Home ..... Business .....
3. Existing Use .....
4. Property Presently Zoned As .....
5. Proposed Use:  
 New Construction ..... Business ..... Remodeling ..... Industry .....  
 Accessory Bldg. .... Sign ..... Size ..... Residence ..... No. Units.....  
 Other (explain) .....  
 (If proposed use is business or industry enclose a detailed description of the nature of the business or industry)
6. Type of Sewage Disposal .....  
 (If lot not provided with Public water and or Public sewer application shall be accompanied by copy of Health permit issued by Fairfield County Board of Health showing proposed method of water supply and or disposal of sanitary wastes)
7. Lot Width ..... Lot Depth ..... Lot Area .....
8. Square feet of Living Area (Residences) .....  
 Garage ..... Basement ..... Accessory Bldg. ....  
 Commercial ..... Industrial ..... Office .....
9. Building Heights: Stories ..... Feet .....
10. Yard Dimensions. Front ..... Rear .....  
 One Side ..... Sum of Side Yards .....  
 (One side must be 20 feet, sum of both sides must total 50 ft.)
11. Accessory Bldg. Dimensions: Height ..... (Feet) ..... Side .....
12. Number Off - Street Spaces To Be Provided: Parking ..... Loading Berths .....
13. On a separate sheet attach a list of other supplemental requirements or conditions that will be met, or explain any points you feel need clarification. (3 copies)

**NOTE:** This permit void if work not **started within 1 year** or **completed within 2½ years.**

Signature..... Date.....

-----  
(FOR OFFICIAL USE ONLY)

Date Received..... Fee Paid .....

Date of Action on Application ..... Approved ..... Denied .....