Application for Zoning Certificate

Plain Township, Wood County, Ohio

Application No._____

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:_____Present Zoning_____

2. Name of Property Owner(s):_____

    Address:_____
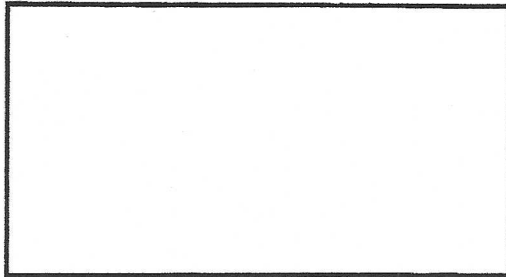
3. Occupant:_____

4. Proposed Use:_____
    (i.e. Business, New Construction, Remodeling, Manufacturing, Sign Including Size, Accessory Building,
    Residence including No. of Families, Commercial Use, Pond, Other (explain below. Use additional page if
    needed).

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

    a) Main road frontage _____feet   b) Set back from road right of way _____feet
    c) Side yard setbacks: _____side _____feet, _____side _____feet d) Rear year setback _____feet
    e) Depth of lot from right of way _____feet f) Dimensions of building(s): Width _____feet, Depth_____feet
    g) Highest point of building above established grade_____feet.

    Additional drawing or
    plans are attached

6. Buildings: 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. Additional Info:_____

    _____

Applicant and Contractor agree to abide by all applicable zoning regulations in Plain Township.

_____   _____
          (Applicant)   (Witness)

_____, Contractor

Filed with Zoning Inspector: _____, 20_____.

Upon the basis of the information provided above, the statements in which are made a part hereof, the proposed usage
is **found / not found** (circle one) to be in accordance with the Plain Township Zoning Resolution and is hereby
approved / rejected (circle one).

_____Plain Township Zoning Inspector

Date application received_____, 20_____. Date application ruled on_____, 20_____.

Fee paid: $_____. If application is refused, reason for refusal_____

Note: This certificate expires 1 year from the date the application was ruled on as stated above.