

Brunswick Hills Township
1918 Pearl Road, Brunswick, Ohio 44212
Medina County

APPLICATION FOR A RESIDENTIAL ZONING CERTIFICATE

Zoning Certificate Number 20 ___ - _____

The undersigned hereby applies to Brunswick Hills Township, Medina County, Ohio for a zoning certificate for the following use. Said certificate to be issued on the basis of the information contained within this application and its attachments. This application is to be submitted to the office of the Zoning Inspector.

1. Land Owner's Name: _____ Phone: _____

Mailing Address: _____

2. Address of Property _____ Sub Lot# _____

3. Permanent Parcel Number **(required)** _____

4. Builder's Name _____ Work Phone: _____

Mailing Address _____

5. Reason For Zoning Certificate: ___ New Dwelling. ___ Addition to Dwelling

6. Zoning District: _____ 7. Existing Use of Bldg. (s) and/or Lot _____

8. Proposed Use of Building(s) and/or Lot: _____

9. Dimensions of Proposed Building:

Width _____ Feet Height _____ Feet Length _____ Feet

Living Area _____ Sq. Ft. (1st & 2nd Floor) Foundation/Bsmt. _____ Sq. Ft.

Garage _____ Sq. Ft. **Total** _____ **Sq. Ft.**

9A When will proposed construction begin? _____, 20____

9B Is the lot staked? ___ Yes ___ No (if no when will the lot be staked)? _____

Reminder: A permit will not be issued until lot lines are inspected

10. Construction Cost \$ _____

11. Lot Dimensions: Frontage _____ feet Area in Acres _____

12. Check One: Sanitary Sewer _____ On Site Septic _____

13 Yard Setback Dimensions:

Shortest Distance from Proposed Building to Road Right of Way _____ Feet

Shortest Distance from One Side Lot Line to Proposed Building _____ Feet

Shortest Distance from Other Side Lot Line to Proposed Building _____ Feet

**Shortest Distance from Rear Yard Lot Line to Proposed Building _____ Feet
(required, application will not be processed without this information)**

Shortest Distance from Proposed Building to Closest Existing Building _____ Feet

14. Will Ingress or Egress To The Proposed Building Or Lot Be from a State, County or Township Road? _____ **(A Driveway/Culvert Permit Must Be Obtained And Attached)**

15. Driveway Dimensions: Length _____ Width _____ Feet _____
(For New Dwelling Construction Only)

16. **Is All Or Part Of The Proposed Building Or Lot Located In a Flood Prone or a Flood Plain District? If yes, what portion?** _____

The Applicant is required to submit plans 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, alterations, driveways and parking areas. IT IS UNDERSTOOD AND AGREED THAT ANY ERROR, MISSTATEMENT, MISREPRESENTATION OF FACT OR EXPRESSION OF FACT, WHETHER INTENDED OR NOT, THAT WOULD CAUSE A ZONING CERTIFICATE TO BE ISSUED, THAT WOULD OTHERWISE BE DENIED, SHALL CONSTITUTE SUFFICIENT GROUND FOR REVOCATION OF ZONING CERTIFICATE AT ANY TIME. THE APPLICANT HEREBY CERTIFIES THAT ALL INFORMATION IN THIS APPLICATION AND ITS ATTACHMENTS ARE TRUE AND CORRECT. **THE APPLICANT FURTHERMORE UNDERSTANDS THAT THIS CERTIFICATE SHALL BECOME NULL AND VOID AND OF NO EFFECT SIX (6) MONTHS FROM THE DATE OF ISSUANCE UNLESS CONSTRUCTION IS STARTED. NO HEAVY CONSTRUCTION VEHICLES OF ANY KIND ARE TO ENTER A SITE UNTIL 8a.m. AND MUST EXIT NO LATER THAN 6P.M. CONSTRUCTION HOURS ARE 8A.M. UNTIL 6P.M. MONDAY THRU FRIDAY AND 8A.M. UNTIL 4P.M. ON SATURDAY, NO CONSTRUCTION IS TO BE CONDUCTED ON SUNDAY OR LEGAL HOLIDAYS.**

SIGNATURE _____ DATE _____

****THERE WILL BE NO FEES REFUNDED AFTER RECORDING BY THE TOWNSHIP FISCAL OFFICER****

DATE RECEIVED _____ FEE PAID \$ _____ CASH _____ CHECK NUMBER _____

DATE OF ACTION APPLICATION _____ APPROVED _____ DENIED _____

Brunswick Hills Township Zoning Inspector _____