



TOWNSHIP ZONING OFFICE

2090 Ferry Road
Sugar Creek Township, Ohio 45305
Phone: (937) 848-8426

Z22-

ZONING CERTIFICATE APPLICATION

PROPERTY ADDRESS CITY ZIP

PARCEL NUMBER SUBDIVISION LOT #

ACREAGE DOES THE FRONT LOT LINE GO TO THE CENTER OF THE ROAD? Yes* No

*In the event that the front lot line does not fall along a right-of-way line, then the front setback line shall be measured from a line parallel to and twenty-five (25) feet from the centerline of the street, road, or thoroughfare.

APPLICANT PHONE

ADDRESS CITY ZIP

PROPERTY OWNER PHONE

ADDRESS CITY ZIP

CONTRACTOR PHONE

ADDRESS CITY ZIP

CHECK ALL THAT APPLY:

- RESIDENTIAL: New Construction, Single Family, Multi Family, Deck, Basement Finish, Addition, Shed, Pool, Fence, Detached Garage/Pole Barn, Other

- COMMERCIAL: New Construction, Warehouse, Office, Business, Accessory Structure, New Use, Tenant Finish, Fence, Free Standing Sign, Addition, Wall Sign, Temporary Sign, Other

Explain use/project in detail: (type of construction, business name, type of business, materials used or stored, etc.)

List all existing structures, including their sizes in square feet, on the subject parcel (if making application for permanent signage, include all existing signs and their sizes/locations):

IT IS THE RESPONSIBILITY OF THE OWNER/APPLICANT TO COMPLY WITH ANY AND ALL CIVIL DEED AND/OR SUBDIVISION RESTRICTIONS AND COVENANTS. A FINAL ZONING INSPECTION MUST BE SCHEDULED BY THE APPLICANT UPON COMPLETION OF CONSTRUCTION AND BEFORE OCCUPANCY.

I HEREBY CERTIFY ALL STATEMENTS, SUBMITTED INFORMATION AND PLANS TO BE FACTUAL AND REPRESENTATIVE OF THE PROPERTY RELATIVE TO THIS APPLICATION, AND AGREE TO COMPLY WITH THE SUGARCREEK TOWNSHIP ZONING RESOLUTION AND PROPERTY MAINTENANCE CODE IN THE USE OF THE PROPERTY.

Builder / Applicant Signature Date Owner Signature Date

Email: Email:

SHADED BOX ON OPPOSITE SIDE MUST BE COMPLETED BY THE APPLICANT IF NEW RESIDENTIAL OR COMMERCIAL CONSTRUCTION IS PROPOSED (INCLUDING ADDITIONS AND SHEDS BUT NOT DECKS).

TO BE COMPLETED BY THE APPLICANT ONLY IF STRUCTURES ADDING TO EXISTING LOT COVERAGE ARE PROPOSED (THIS SECTION MUST BE COMPLETED FOR ALL APPLICATIONS PROPOSING NEW RESIDENTIAL OR COMMERCIAL CONSTRUCTION INCLUDING ACCESSORY STRUCTURES AND ADDITIONS):

1ST FLOOR SF _____ 2ND FLOOR SF _____ ATTACHED GARAGE SF _____ TOTAL SF: _____

FINISHED BASEMENT: Yes No IF FINISHED, BASMENT SQUARE FOOTAGE: _____

PROPOSED BUILDING HEIGHT*: _____

***Building height is the mean height between the eaves and ridge on gable, hip, or gambrel roofs.**

CALCULATE LOT COVERAGE PERCENTAGE**: Please specify what is included (i.e. 2500 SF house, 100 SF shed, etc.) _____

****All applicants submitting for any use that adds to lot coverage (i.e. sheds, barns, new homes, new commercial buildings, additions, etc.) must provide lot coverage computations to confirm conformance with established lot coverage standards. Lot coverage is defined as "that portion of a lot that is covered by the principal and accessory buildings and structures and surfaces that prevent the passage or absorption of stormwater, including paving and driveways (impervious surfaces)."**

AVAILABLE: PUBLIC WATER? Yes No*** PUBLIC SEWER? Yes No***

*****In every instance where a lot is not serviced by public water and/or the disposal of sanitary wastes by means of public sewers, the application for a Zoning Certificate for a new dwelling or an addition adding to the number of existing bedrooms shall be accompanied by a certificate of approval by the county health officer of the proposed method of water supply and/or the disposal of sanitary wastes. Commercial uses require EPA approval.**

SUGARCREEK TOWNSHIP ZONING OFFICE USE ONLY

REVIEWED BY _____ APPROVED/DENIED DATE _____ FEE RECEIPT _____

ADDRESS SIGN ORDERED _____ DRIVEWAY PERMIT TO R & S DEPT. _____

SITE PLAN SCANNED _____ SITE PLAN EMAILED TO SWCD _____ SWCD REC. _____

COPIED TO CZ/RP _____ COMMERCIAL PLANS TO FD _____ APPROVED DATE _____

ZONING DISTRICT _____ BZA/BZC CASE # _____ R-POD/PD FINAL PLAN PULLED _____

CONFORMS W/ APPROVAL _____

CALCULATIONS

REQUIRED:

MIN. FYSB= _____
MIN. SYSB= _____/_____
MIN. RYSB= _____
MAX. LC= _____
MAX. HEIGHT= _____

PROPOSED:

FYSB= _____
SYSB= _____/_____
RYSB= _____
LC= _____
HEIGHT= _____

RECORD PLAT PULLED _____

HD/EPA APPROVAL RECEIVED _____

FOR COMMERCIAL SUBMISSIONS ATTACH COMMERCIAL SITE PLAN REVIEW SHEET.

NOTES: