CITY OF BELLEFONTAINE · ENGINEERING DEPARTMENT

135 N DETROIT ST · BELLEFONTAINE, OHIO 43311
ENGINEERING@BELLEFONTAINEOHIO.GOV
(937) -593-0417

ALL PERMITS REQUIRE THE WORK TO START WITHIN 6 MONTHS OF APPROVAL DATE. PERMITS EXPIRE ONE YEAR FROM APPROVAL DATE.

APPLICATION FOR ZONING CERTIFICATE

OFFICE USE ONLY DATE:	ZONING DISTRICT:	ZONING FEE: $ $ 0.00	ZONING CERT #:

JOB AND APPLICANT INFORMATION:

OWNER:	
ADDRESS:	PHONE:
CITY/STATE/ZIP:	EMAIL:

CONTRACTOR INFORMATION:

CONTRACTOR:	CONT. REGISTRATION #:
ADDRESS:	PHONE:
CITY/STATE/ZIP:	EMAIL:

ARCHITECT/ENGINEERING INFORMATON:

ARCHITECT/ENGINEER:	
ADDRESS:	PHONE:
CITY/STATE/ZIP:	EMAIL:

PROJECT INFORMATION:

WORK SITE LOCATION:	***SKETCH/SITE PLAN REQUIRED***
TOTAL COST OF JOB:	
DESCRIBE IN DETAIL NATURE OF PROJECT: _____	
TYPE OF IMPROVEMENT: ☐ NEW BUILD ☐ REPAIR/REPLACE ☐ ADDITION/ALTERATION ☐ OTHER:_____	

TYPE OF USE:

RESIDENTIAL	NON-RESIDENTIAL:
☐ ONE FAMILY ☐ TWO FAMILY ☐ THREE FAMILY ☐ FOUR OR MORE FAMILY ☐ ACCESSORY USE ☐ OTHER: _____	☐ AMUSEMENT/RECREATION ☐ CHURCH/RELIGIOUS ☐ INDUSTRIAL ☐ SCHOOL ☐ OFFICE/BANK ☐ PUBLIC WORKS ☐ ACCESSORY USE ☐ SERVICE STATION/GARAGE ☐ HOSPITAL/INSTITUTION ☐ OTHER: _____

BUILDING DETAILS (IF APPLICABLE):

DIMENSIONS: LENGTH	SQ FT LIVING AREA:
WIDTH:	SQ FT GARAGE:
HEIGHT:	NEW BUILD TOTAL SQ FT:
NUMBER OF STORIES:	EX. STRUCTURES TOTAL SQ FT:
TYPE OF SEWAGE DISPOSAL: ☐PRIVATE ☐PUBLIC	**TYPE OF WATER SUPPLY:** ☐PRIVATE ☐PUBLIC

OFFICE USE ONLY
INSPECTION: ☐ REQUIRED ☐ NOT REQUIRED

*NOTICE MUST BE GIVEN TO THE ENGINEERING DEPARTMENT 48 HOURS BEFORE INSPECTION IS REQUIRED.
PLEASE CONTACT BOB MARKLEY (937)-539-8308 TO SCHEDULE INSPECTIONS.

THE OWNER OF THIS BUILDING AND APPLICANTS DO HEREBY COVENANT AND AGREE TO FOLLOW ALL LAWS OF THE STATE OF OHIO AND THE ORDINANCES OF THIS JURISDICTION AND TO CONSTRUCT THE PROPOSED BUILDING OR STRUCTURE OR MAKE THE PROPOSED CHANGE OR ALTERATION IN OCCORDANCE WITH THE PLANS AND SPECIFICATIONS SUBMITTED HEREWITH, AND CERTIFY THAT THE INFORMATION AND STATEMENTS GIVEN ON THIS APPLICATION, DRAWINGS AND SPECIFICATIONS ARE TO THE BEST OF THEIR KNOWLEDGE, TRUE AND CORRECT. WE FURTHER ATTEST THAT THE PROPOSED USE AND/OR ALTERATION DOES NOT VIOLATE ANY COVENANCE, DEED RESTRICTIONS OR EASEMENT LANGUAGE.

ALL FEES MUST BE PAID BEFORE WORK COMMENCES. ***ALWAYS CALL OUPS BEFORE YOU DIG 811 OR 1-800-362-2764***

APPLICANT'S SIGNATURE:	DATE:
OWNER'S SIGNATURE:	DATE:
OFFICE USE ONLY PERMIT ISSUED BY:	DATE:

FOLLOW UP WITH LOGAN COUNTY BUILDING AUTHORITY REQUIRED: ☐ YES ☐ NO