

# Village of Hanover Ohio

## APPLICATION FOR ZONING PERMIT Section 302, Hanover Zoning Code "Appendix A"

Date \_\_\_\_\_

1. Applicant Name: \_\_\_\_\_ Phone: \_\_\_\_\_
2. Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_
3. Email Address: \_\_\_\_\_
4. Property Address: \_\_\_\_\_
5. Contractor Name: \_\_\_\_\_ Phone: \_\_\_\_\_
6. Contractor Address: \_\_\_\_\_ City: \_\_\_\_\_

7. Residential Use:	S.F. or Each	Units	Fee
a. <input type="checkbox"/> New Residence	_____	_____	\$ _____
b. <input type="checkbox"/> Remodel Residence	_____	_____	\$ _____
c. <input type="checkbox"/> Garage	_____	_____	\$ _____
d. <input type="checkbox"/> Accessory Building Permanent	_____	_____	\$ _____
e. <input type="checkbox"/> Accessory Building Non-Permanent	_____	_____	\$ _____
f. <input type="checkbox"/> Deck, Patio, Porch	_____	_____	\$ _____
g. <input type="checkbox"/> Demolition	_____	_____	\$ _____
h. <input type="checkbox"/> Driveway/Culvert (see application)	_____	_____	\$ _____
i. <input type="checkbox"/> Fence	_____	_____	\$ _____
j. <input type="checkbox"/> Flood Plain Permit (see application)	_____	_____	\$ _____
k. <input type="checkbox"/> Lot Split (see application)	_____	_____	\$ _____
l. <input type="checkbox"/> Sign (see application)	_____	_____	\$ _____
m. <input type="checkbox"/> Swimming Pool - above ground	_____	_____	\$ _____
n. <input type="checkbox"/> Swimming Pool - below ground	_____	_____	\$ _____
o. <input type="checkbox"/> Other	_____	_____	\$ _____
p. <input type="checkbox"/> Conditional Use	_____	_____	\$ _____
q. <input type="checkbox"/> New Address (see application)	_____	_____	\$ _____
r. <input type="checkbox"/> Sewer Connection (see application)	_____	_____	\$ _____

8. Non-Residential Use (see also number 7 below):
  - a.  New Commercial \_\_\_\_\_ \$ \_\_\_\_\_
  - b.  Remodel Commercial \_\_\_\_\_ \$ \_\_\_\_\_
  - c.  Manufacturing \_\_\_\_\_ \$ \_\_\_\_\_
  - d.  Swimming Pool - commercial \_\_\_\_\_ \$ \_\_\_\_\_
  - e. Does applicant have Development Plan Approval from Planning Commission (circle one) **Yes** or **No**

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9. Total Zoning Permit Fee \$ \_\_\_\_\_

*I certify the information contained in this application and attachments is true and accurate*

Applicants signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Sketch of Lot and Proposed Use**

(Attach survey plat of property & architectural drawings)

(For non-residential use attach approved development plans)

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## -- Below for official use only --

Zoning Application Number: \_\_\_\_\_

Total Fee Paid: \$ \_\_\_\_\_ Check Number: \_\_\_\_\_ Cash: \_\_\_\_\_

1. Current Zoning: \_\_\_\_\_
2. Does requested use meet Current Zoning (circle one)? **Yes** or **No** (if no, see number 2a & 2b)
  - a. Proposed Zoning: \_\_\_\_\_ (Applicant needs Re-Zoning Application)
  - b. Will the property require a Variance to meet zoning (circle one)? **Yes** or **No** (if yes, see number 3)
3. Has applicant received approved variance from Village of Hanover Board of Zoning Appeals (circle one)? **Yes** or **No** (if No, do not issue permit until copy of approved variance is provided, if Yes, see 3a)
  - a. Date of Approved Variance: \_\_\_\_\_
4. Has applicant connected to Village Sewer System (circle one)? **Yes** or **No** (if No, applicant needs sewer connection form)
5. Will your Use have water from a (circle one)? **Private Well**, **Community Well**, or **Municipal Water**
  - a. If Private or Community well, do you have your permit from Health Department or EPA (circle one) **Yes** or **No**
6. Remarks:

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# Village of Hanover Ohio

Application Received: \_\_\_ / \_\_\_ / \_\_\_ By: \_\_\_\_\_

Zoning Application - Approved: \_\_\_ / \_\_\_ / \_\_\_ Denied: \_\_\_ / \_\_\_ / \_\_\_

BZA Meeting Date for Variance/Appeal: \_\_\_ / \_\_\_ / \_\_\_ (section 514)

Signatures (as needed):

Village of Hanover, Zoning Inspector: \_\_\_\_\_

Village of Hanover, P&Z Chairperson: \_\_\_\_\_

Village of Hanover, Mayor: \_\_\_\_\_