



Permit No. _____

City of Mount Vernon, Ohio Application for Zoning Permit

Application	
Owner's Name, Address and Phone	
Contractor's Name, Address and Phone	
Applicant's Name, Address and Phone	

Site Information		
Site Address	Side Street (if corner lot)	
Legal Description	Parcel Number	Deed Volume and Page Number
Zoning District	Flood Zone <input type="checkbox"/> Floodway <input type="checkbox"/> AE Zone <input type="checkbox"/> A Zone <input type="checkbox"/> X Zone	
Historic District <input type="checkbox"/> Yes <input type="checkbox"/> No	Status of Historic Review Commission's Action <input type="checkbox"/> Approved <input type="checkbox"/> Denied Case Number:	

Project Information			
Description of Proposed Work			
Existing use of property		Proposed use of property	
Parking spaces/loading berths	Building heights	Dwelling units	
State Approval	Date	Approval Number	<input type="checkbox"/> Full approval <input type="checkbox"/> Partial approval <input type="checkbox"/> Not required
<p>I hereby certify that the information submitted on this application an on any sketches, drawings or other documents submitted with this application is true and exact. This permit shall expire and may be revoked if work has not begun within six months or substantially completed within one year.</p> <p style="text-align: center;">Date: _____ By: _____</p>			

Status of Application			
<input type="checkbox"/> Application rejected	Date	By	Reason(s)
<input type="checkbox"/> Referred to Board of Appeals	Status of Board's Action <input type="checkbox"/> Approved <input type="checkbox"/> Denied Case Number:		
<input type="checkbox"/> Application approved Comments			
Date:		By:	

Fee Calculation				
Estimated Cost	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 100%;">Base Fee</td> </tr> <tr> <td>Park Development Fee</td> </tr> <tr> <td>Total Fee</td> </tr> </table>	Base Fee	Park Development Fee	Total Fee
Base Fee				
Park Development Fee				
Total Fee				

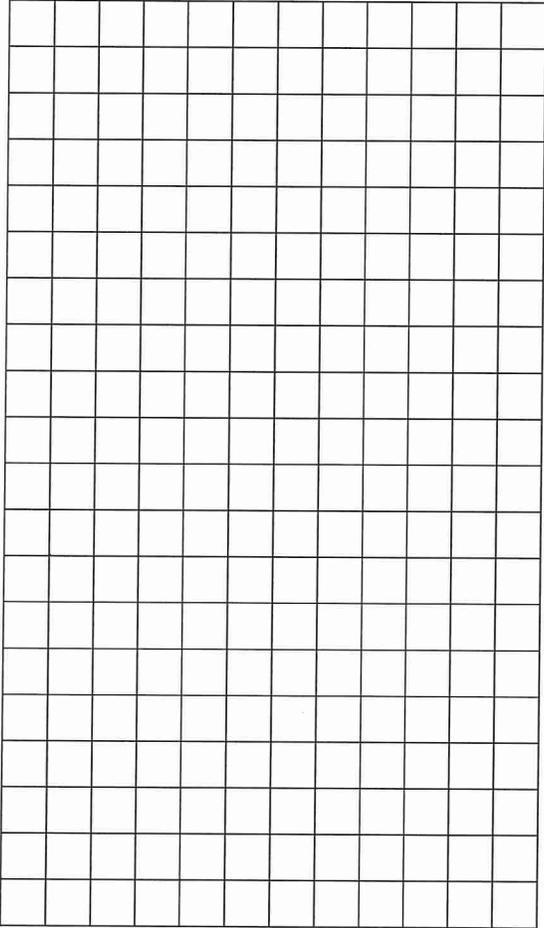
City of Mount Vernon Zoning Permit Sketch

Site Address _____

Instructions to Applicant

Supply all the information requested and complete the diagram below by showing the following:

- 1. Existing structures with solid lines
- 2. Proposed structures with dashed lines
- 3. Setback distances from all property lines.
- 4. Dimensions of all structures
- 5. Dimensions of the lot
- 6. Street name(s)



Street Name _____

I hereby certify that the information submitted on this sketch and/or other attached drawings and documents is true and correct.

By _____
Date _____

Zoning Enforcement Officer Action

Approved Disapproved

By _____
Date _____