



**APPLICATION FOR ZONING PERMIT**

*Please see instructions on Page 2*  
**Page 1 of 2 Both Pages Required**

80 N. Walnut Street, Suite C  
 Mt. Gilead, OH 43338  
 Zoning Office: 419-946-1911  
[www.morrowcountyohio.gov](http://www.morrowcountyohio.gov)

APPLICATION DATE

Applicant	Applicant's Name	Type of Applicant:	Owner/Leasee	Contractor
	Applicant's Address			
	Phone #	Email		

Property Location	Address			
	Parcel #	Township		
	Property Existing Use As	Owner's Name (if different)	Owner's Phone #	

Type of Work	New Residential Building	Garage	Sign
	Accessory Building	Deck with Roof	Gazebo
	Addition	Porch with Roof	
	Manufactured Home	Other	

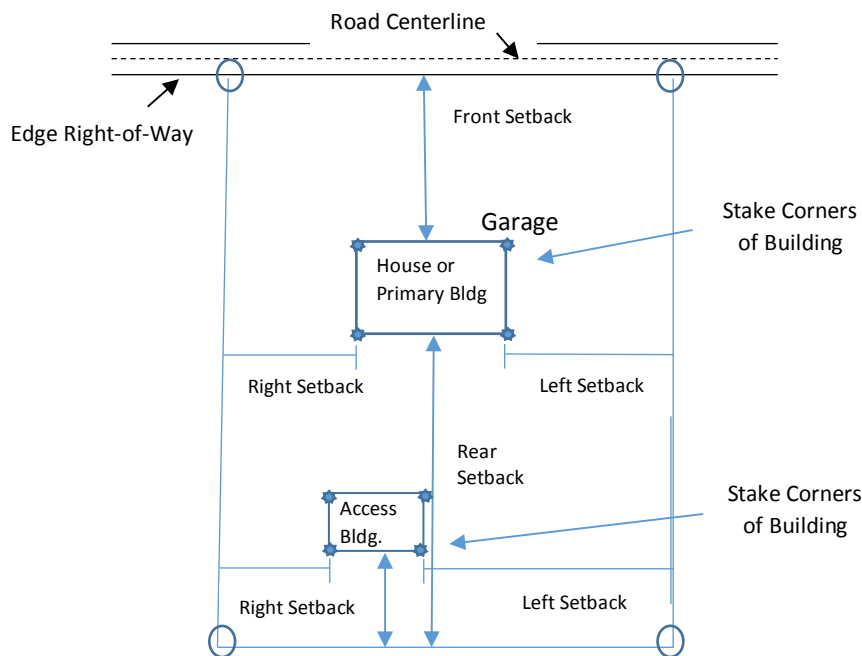
Project Information	<b>STRUCTURE AREA</b>		Sq. Ft.		<b>SIGN AREA</b>		Sq. Ft.		
	<b>Structure Classification:</b>		Residential	Agricultural		Sign Dimensions			
	Commercial		Industrial	Other		Type of Sign			
	<b>Building Use:</b>								
	<b>Structure Specifications:</b>		Living Space		Sq. Ft.	Non-Living Space		Sq. Ft.	# of Stories
	# of Bedrooms		# of Bathrooms		Building Classification				
	Length of Structure		Width of Structure		Type of Frame				
	<b>Septic:</b>								
	Type of Sewage Disposal		Septic Onsite Report (New Residence Only)			Yes	No		
	<b><u>PROPOSED SETBACKS (for your particular structure):</u></b>								
Front	Ft.	Rear	Ft.	Right Side	Ft.	Left Side	Ft.		

Applicant Signature	The undersigned applies for a zoning permit. Said permit to be issued on the basis of the information contained within this application. The Applicant certifies that the information provided above is correct and the use is as stated. This APPLICATION FOR ZONING PERMIT is for (1) year only from the date of issuance. After (1) year, a new APPLICATION FOR ZONING PERMIT will be issued with appropriate fees being applied. The Applicant further agrees to contact the Morrow County Zoning Office at <b>419-946-1911</b> once the building is complete for a final inspection at which time the Applicant will receive a Zoning Certificate.	
	Date:	<b>Type your full name as Signature:</b>

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A Site Plan MUST be submitted with this Application.

Example of a Typical Site Plan



Customer to Provide

Site Plan drawn to scale and includes dimensions

Site Plan including location of well/septic

Setbacks – Front, Right Side, Left Side, Rear

If New Residential, copy of Morrow County Health Dept. Septic Onsite Report

Completion of Application of Zoning Permit (Page 1)

YOUR PERMIT APPLICATION will be reviewed for: Setbacks and actual land use.