

80 N. Walnut Street, Suite C
Mt. Gilead, OH 43338
Zoning Office: 419-946-1911
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	STRUCTURE AREA		Sq. Ft.	SIGN AREA		Sq. Ft.
	Structure Classification:	☐ Residential	☐ Agricultural	Sign Dimensions		
	☐ Commercial	☐ Industrial	☐ Other	Type of Sign		
	Building Use:					
	Structure Specifications:					
	Living Space		Sq. Ft.	Non-Living Space		Sq. Ft.
	# of Bedrooms		# of Bathrooms		Building Classification	
	Length of Structure		Width of Structure		Type of Frame	
	Septic:					
	Type of Sewage Disposal		Septic Onsite Report (New Residence Only)	☐ Yes ☐ No		
PROPOSED SETBACKS (for your particular structure):						
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 419-946-1911 once the building is complete for a final inspection at which time the Applicant will receive a Zoning Certificate.	
	Date:	Type your full name as Signature:

80 N. Walnut Street, Suite C Mt.

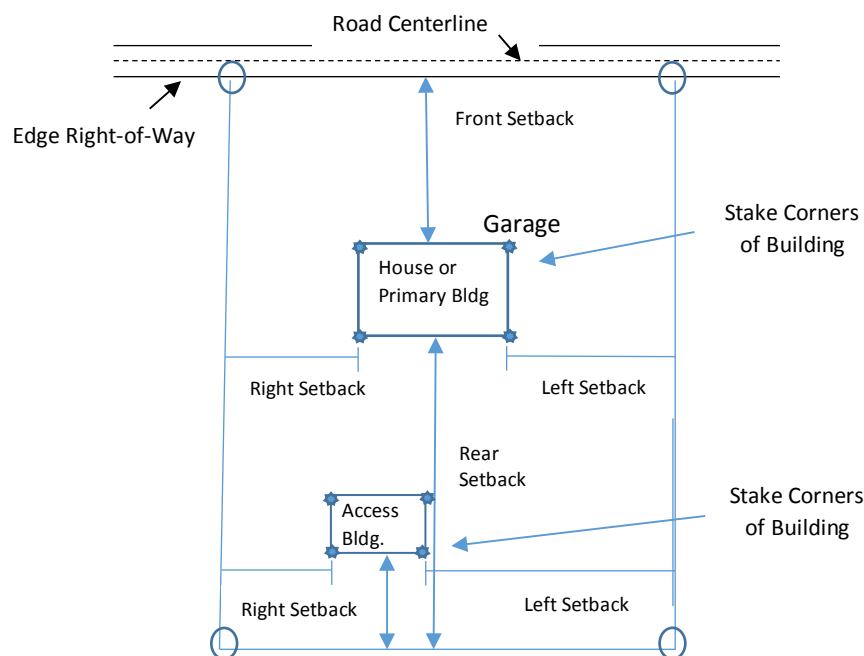
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zoning@morrowcountyohio.gov

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.