

**CITY OF NORWALK  
 APPLICATION FOR ZONING PERMIT  
 38 WHITTLESEY AVENUE  
 NORWALK, OHIO 44857  
 (419) 663-6783**

**OWNER  
 NAME:** \_\_\_\_\_

<i>OFFICE USE ONLY</i>	
PERMIT NO.	_____
DATE:	_____
TYPE:	_____
PRICE:	_____

**IMPORTANT – Applicant to complete all items in sections: I, II, III, IV, V, and VII**

<b>I. LOCATION OF BUILDING</b>	AT (LOCATION) _____ ZONING DISTRICT _____ <small>(NO.) (STREET)</small> SUBDIVISION _____ LOT _____ LOT SIZE _____ PARCEL NO. _____
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**II. TYPE AND COST OF BUILDING – All applicants complete Parts A – D**

<b>A. TYPE OF IMPROVEMENT</b> 1. <input type="checkbox"/> New Residential Building 2. <input type="checkbox"/> Residential Addition 3. <input type="checkbox"/> Residential Alteration 4. <input type="checkbox"/> New Commercial Building 5. <input type="checkbox"/> Commercial Addition 6. <input type="checkbox"/> Commercial Alteration 7. <input type="checkbox"/> Electrical 8. <input type="checkbox"/> Garage 9. <input type="checkbox"/> Garage Addition 10. <input type="checkbox"/> Utility Building 11. <input type="checkbox"/> Swimming Pool 12. <input type="checkbox"/> House Moving 13. <input type="checkbox"/> Demolition 14. <input type="checkbox"/> Sign 15. <input type="checkbox"/> Home Occupation 16. <input type="checkbox"/> Temporary Sales	<b>B. PROPOSED USE – for “wrecking” most recent use</b>  <table style="width: 100%;"> <tr> <td style="width: 50%; vertical-align: top;"> <b>Residential</b>            17. <input type="checkbox"/> One family            18. <input type="checkbox"/> Two or more family                  enter no. of units _____            19. <input type="checkbox"/> Transient hotel, motel, or dormitory                  enter no. of units _____            20. <input type="checkbox"/> Garage            21. <input type="checkbox"/> Carport            22. <input type="checkbox"/> Other – Specify                  _____         </td> <td style="width: 50%; vertical-align: top;"> <b>Nonresidential</b>            23. <input type="checkbox"/> Amusement, recreational            24. <input type="checkbox"/> Church, other religious            25. <input type="checkbox"/> Industrial            26. <input type="checkbox"/> Parking garage            27. <input type="checkbox"/> Service station, repair garage            28. <input type="checkbox"/> Hospital, institutional            29. <input type="checkbox"/> Office, bank, professional            30. <input type="checkbox"/> Public utility            31. <input type="checkbox"/> School, library, other educational            32. <input type="checkbox"/> Stores, mercantile            33. <input type="checkbox"/> Tanks, towers            34. <input type="checkbox"/> Other – Specify                  _____         </td> </tr> </table>	<b>Residential</b> 17. <input type="checkbox"/> One family 18. <input type="checkbox"/> Two or more family enter no. of units _____ 19. <input type="checkbox"/> Transient hotel, motel, or dormitory enter no. of units _____ 20. <input type="checkbox"/> Garage 21. <input type="checkbox"/> Carport 22. <input type="checkbox"/> Other – Specify _____	<b>Nonresidential</b> 23. <input type="checkbox"/> Amusement, recreational 24. <input type="checkbox"/> Church, other religious 25. <input type="checkbox"/> Industrial 26. <input type="checkbox"/> Parking garage 27. <input type="checkbox"/> Service station, repair garage 28. <input type="checkbox"/> Hospital, institutional 29. <input type="checkbox"/> Office, bank, professional 30. <input type="checkbox"/> Public utility 31. <input type="checkbox"/> School, library, other educational 32. <input type="checkbox"/> Stores, mercantile 33. <input type="checkbox"/> Tanks, towers 34. <input type="checkbox"/> Other – Specify _____
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**C. OWNERSHIP**  
 35.  Private (individual, corporation, nonprofit institution, etc.)  
 36.  Public (Federal, State, or Local government)

<b>D. COST</b> 37. Cost of improvement . . . . .  To be installed but not included in the above cost a. Electrical . . . . . b. Plumbing . . . . . c. Heating, air conditioning . . . . . d. Other (elevator, etc.) . . . . .  38. TOTAL COST OF IMPROVEMENT	(Omit cents) \$ _____  _____ _____ _____ _____ \$ _____	Nonresidential – Describe in detail proposed use of buildings, e.g., food processing plant, machine shop, laundry building at hospital, elementary school, secondary school, college, parochial school, parking garage for department store, rental office building, office building or industrial plant. If use of existing building is being changed, enter proposed use.
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**III. SELECTED CHARACTERISTICS OF BUILDING** – for new buildings and additions, complete Parts E – L; for wrecking, complete only Part J, for all others skip to IV

<b>E. PRINCIPAL TYPE OF FRAME</b> 39. <input type="checkbox"/> Masonry (wall bearing) 40. <input type="checkbox"/> Wood frame 41. <input type="checkbox"/> Structural steel 42. <input type="checkbox"/> Reinforced concrete 43. <input type="checkbox"/> Other – Specify _____  <b>F. PRINCIPAL TYPE OF HEATING FUEL</b> 44. <input type="checkbox"/> Gas 45. <input type="checkbox"/> Oil 46. <input type="checkbox"/> Electricity 47. <input type="checkbox"/> Coal 48. <input type="checkbox"/> Other – Specify _____	<b>G. TYPE OF SEWAGE DISPOSAL</b> 49. <input type="checkbox"/> Public or private company 50. <input type="checkbox"/> Private (septic tank, etc.)  <b>H. TYPE OF WATER SUPPLY</b> 51. <input type="checkbox"/> Public or private company 52. <input type="checkbox"/> Private (well, cistern)  <b>I. TYPE OF MECHANICAL</b> Will there be central air conditioning? 53. <input type="checkbox"/> Yes                      54. <input type="checkbox"/> No Will there be an elevator? 55. <input type="checkbox"/> Yes                         56. <input type="checkbox"/> No  <b>J. DIMENSIONS</b> 57. Number of stories _____ 58. Total square feet of floor area, all floors, based on exterior _____ 59. Total Land Area, sq. ft _____	<b>K. NUMBER OF OFF-STREET PARKING SPACES</b> 60. Enclosed _____ 61. Outdoors _____  <b>L. RESIDENTIAL BUILDINGS ONLY</b> 62. Number of bedrooms _____ 63. Number of bathrooms Full _____ Partial _____
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**IV. DESCRIPTION OF WORK**

**V. SITE OR PLOT PLAN**

**VI. DEVELOPMENT STANDARDS FOR MB ZONING DISTRICT**

	PERMITTED AND CONDITIONAL USES	
	Residential	Non-Residential
<b>Minimum Lot Area</b>	7,500 square feet	None
<b>Minimum Lot Width</b>	70 feet	None
<b>Minimum Front Yard</b>	25 feet	None
<b>Minimum Side Yard</b>		25 feet
<b>1 and 1 ½ Story</b>	10 feet	
<b>2 and 2 ½ Story</b>	10 feet	
<b>3 and 3 ½ Story</b>	sum of 25 feet, minimum 10	
<b>Minimum Lot Frontage</b>	70 feet	200 feet
<b>Minimum Rear Yard</b>		
<b>1 and 1 ½ Story</b>	30 feet	20 feet
<b>2 and 2 ½ Story</b>	35 feet	30 feet
<b>3 and 3 ½ Story</b>	40 feet	40 feet
<b>Maximum Height</b>	3 stories or 40 feet	3 stories or 40 feet

**VII. IDENTIFICATION – To be completed by all applicants**

_____	_____	_____
1. Property Owner or Lessee	Mailing address	Telephone No.
_____	_____	_____
2. Contractor	Mailing address	Telephone No.
_____	_____	_____
3. Architect or Engineer	Mailing address	Telephone No.

I hereby certify that the proposed work is authorized by the owner of record and that I have been authorized by the owner to make this application as his authorized agent and we agree to conform to all applicable laws of this jurisdiction.

_____	_____	_____
Signature of Applicant	Address	Application Date

<b>OFFICE USE ONLY</b>	
Zoning Permit number _____	Approved by: _____ _____ TITLE
Zoning Permit issued _____	
Zoning Permit Fee _____	

Return completed application in person to:  
 City of Norwalk Zoning Inspector  
 38 Whittlesey Avenue  
 Norwalk, OH 44857