

CITY OF NORWALK
APPLICATION FOR ZONING PERMIT
38 WHITTLESEY AVENUE
NORWALK, OHIO 44857

Office Use Only:

Permit No. _____

Date Issued _____

FENCE PERMIT APPLICATION

APPLICANT NAME _____

Is applicant the owner of record? Yes or No (circle one)

LOCATION OF BUILDING

AT (ADDRESS) _____

ZONING DISTRICT _____

LOT SIZE _____

PARCEL NUMBER _____

TYPE OF BUILDING

Residential

Nonresidential
Specify

OWNERSHIP

Private (individual, corporations, nonprofit institution, etc.)

Public (Federal, State, or Local government)

COST

Total Cost of Improvement (including labor)

\$ _____

DESCRIPTION OF WORK (include dimensions & material to be used, etc.) A sample/photo of the material is preferred.

SITE OR PLOT PLAN (include photo/diagram if possible)

By signing this application, the applicant agrees to abide by all rules and guidelines as they appear in Section 1173.016 of the Norwalk Codified Ordinance.

IDENTIFICATION

_____ Property Owner Signature	_____ Mailing Address	_____ Phone #
_____ Lessee Signature	_____ Mailing Address	_____ Phone #
_____ Contractor Signature	_____ Mailing Address	_____ Phone #
_____ Architect or Engineer Signature	_____ Mailing Address	_____ Phone #

Under penalty of falsification, Ohio Revised Code Section 2921.13, 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. Contractors, Architects and Engineers **must** also complete a Construction Affidavit.

_____ Signature of Applicant	_____ Mailing Address	_____ Phone #
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Application Fee for a Fence Permit is \$10 and must accompany the application.

ARCHITECTURAL REVIEW BOARD ASSESSMENT

Does this location fall in the Architectural District? yes or no (please circle)
If yes, it is recommended that the applicant complete an Application for Certificate of Appropriateness to be presented before the Architectural Review Board.

VALIDATION (Office Use Only)

_____ Approved by _____ Title _____ Date	Notes/Comments:
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