



Duplex/Multi-Family Residential Permit Application

City of Findlay, Zoning Office, 304 Municipal Building
318 Dorney Plaza, Findlay, Ohio 45840
(419) 424-7108; Fax (419) 424-7120

CPC # _____
Date reviewed _____

THIS APPLICATION MUST BE COMPLETED! LACK OF INFORMATION OR DETAILS ON PLANS WILL RESULT IN THE APPLICATION NOT BEING PROCESSED.

SIDEWALK PERMIT MUST BE ISSUED PRIOR TO THIS PERMIT.

Submit two (2) site plans drawn to scale showing actual size, dimensions, and shape of the lot, with corner pins shown; existing and proposed buildings or structures and parking spaces, their distance to lot lines and other information that is essential to the permit and property.

Please Print

Address of Property: _____

Lot Number & Subdivision Name: _____

Owner Name: _____ Address: _____

City, State, Zip: _____ Day Phone: _____

Applicant if not Owner Name: _____ Address: _____

City, State, Zip: _____ Day Phone: _____

Contractor: _____ Address: _____

City, State, Zip: _____ Day Phone: _____

Number of dwelling units proposed: _____ Lighting: _____

Size of building (including attached garage) in square feet: _____
(footprint only)

Height of house peak: _____ Number of Stories: _____ Living area: _____
(excluding garage, basement, porches)

Garage attached? Yes / No If yes, how many cars? _____ If no, show parking on plan
Detached garage requires a separate permit.

Basement? Yes / No If yes, must be shown on plan. Value of Construction \$ _____

Corner Lot? Yes / No If yes, give name of side street: _____

Screening type: Level: 1 2 3 Option 1 2 3

If the property is in the flood hazard area, a Flood Development Permit will also be required.

As specified in Section 1165.08 and 1199.09 (falsification), I, the undersigned, do hereby certify that all of the above statements are true to the best of my knowledge, and understand that any deviation, change or alteration not included or shown on these plans will nullify the approval. I further understand that the permit, when issued, is valid for one year from date of issuance.

Signature: _____ Date: _____

12/22/2011

Date received: _____

For office use only!

Lot width _____ X length _____ = area _____

Existing Bldg area _____ + additional area _____ = total _____

Total Bldg Area _____ ÷ Lot area _____ = % lot coverage _____

Corner Lot? Yes / No _____ Zoning District _____ Flood Zone _____

Sidewalk? _____ Curb cut? _____

Screening: _____ Lighting _____

Density _____ Multi-Family Bldg Separation _____

Fire Prevention? Yes / No _____ Screening type level: 1 2 3 Option 1 2 3

Lighting: _____

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Notes of Review:

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Granted Denied by: _____ Date _____

Conditions and/or comments:

Fee \$ _____

Application #: _____