

Type of Work
<input type="checkbox"/> New Building
<input type="checkbox"/> Repair
<input type="checkbox"/> Alteration
<input type="checkbox"/> Addition
<input type="checkbox"/> Non-structural use

APPLICATION
for
BUILDING DEMOLITION
KENTON, OHIO

Application No. _____
Date _____

Application is hereby made for a Zoning Certificate, as follows:

Owner's Name _____

Address _____ Phone No. _____

Builder's Name _____

Address _____ Phone No. _____

Location in Detail _____
(Show sketch on back of sheet)

Kind of Building _____
(Residence, garage, Store, etc.)

Work to be done _____

Position of Building or use on Lot _____
(Show sketch on back of sheet)

Size of Building _____ Cost of Improvements _____

Height in Stories _____ Materials _____

Building to be Heated by _____ No. of Baths _____

Size of Lot _____ Zone _____

Present use of Premises _____ Proposed use _____

Date _____ Owner's Signature _____

Date _____ Applicant's Signature _____

Address _____

FOR OFFICE USE ONLY

Zoning Certificate Issued _____
Date _____ Number _____

Certificate Forwarded to Applicant _____ Mail () Person ()

By _____