

Liverpool Township Zoning

6801 School Street
Valley City, Ohio 44280
www.liverpooltwp.org

Zoning Certificate Number _____

Application for New Home Construction or Addition to Existing Dwelling

Please Read & Complete **All** Sections of the Application

*The undersigned hereby applies to Liverpool Township, Medina County, Ohio for a zoning certificate for the following use. Said certificate to be issued on the basis of the information contained within this application and its attachments. This application is to be submitted to the office of the Zoning Inspector. The Applicant is **required** to submit plans showing the actual dimensions and shape of the lot, exact sizes and locations of existing buildings on the lot, and the location and dimensions of the proposed buildings, alterations, driveways and parking areas.*

1. Land Owner's Name _____ Home Phone _____

Mailing Address _____

Cell Phone _____ Work Phone _____ Email _____

2. Address of Property _____

3. Permanent Parcel Number _____

4. Builder's Name _____ Work Phone _____

Mailing Address _____

5. Reason for Zoning Certificate: _____ New Dwelling _____ Addition to Dwelling

6. Zoning District (Check One): Residential _____ Commercial _____ Manufacturing _____

7. Proposed Use of Building(s) and/or Lot _____

8. Dimensions of Proposed Building:

Width _____ Feet Living Area* _____ Sq. Ft. Total Area _____ Sq. Ft.

Length _____ Feet Finished Bsmt. _____ Sq. Ft. (**Counted In Living Space**)

Height _____ Feet Foundation _____ Sq. Ft.

*Exclude cellar or basement, attic, terraces, breezeway, open porches, and garages.

9. Approximate Construction Cost \$ _____

(Continued On Other Side)

Revised As Of 6/28/2010

10. Lot Dimensions: Frontage _____ Feet
 Area in Acres _____
11. Check One: Sanitary Sewer _____ On-Site Septic _____
12. Shortest Distance from Proposed Building to Road Right Of Way _____ Feet
 Shortest Distance from One Side Lot Line to Proposed Building _____ Feet
 Shortest Distance from Other Side Lot Line to Proposed Building _____ Feet
 Shortest Distance from Rear Yard Lot Line to Proposed Building _____ Feet
 Shortest Distance from Proposed Building to Closest Existing Building _____ Feet
14. Will Ingress Or Egress To The Proposed Building Or Lot Be From A State, County, or Township Road? _____ (A Driveway/Culvert Permit Must Be Obtained and Attached)
15. Driveway and Parking Dimensions: Length of Driveway _____ Feet
 (For New Dwelling Construction Only) Width of Driveway _____ Feet
 Number of Off Street Parking Spaces _____
16. Is All/Part Of Proposed Building/Lot Located In The Flood Plain? Yes _____ No _____
 If Yes What Portion? _____

IT IS UNDERSTOOD AND AGREED THAT ANY ERROR, MISSTATEMENT, MISREPRESENTATION OF FACT OR EXPRESSION OF FACT, WHETHER INTENDED OR NOT, THAT WOULD CAUSE A ZONING CERTIFICATE TO BE ISSUED, THAT WOULD OTHERWISE BE DENIED, SHALL CONSTITUTE SUFFICIENT GROUND FOR REVOCATION OF ZONING CERTIFICATE AT ANY TIME. THE APPLICANT HEREBY CERTIFIES THAT ALL INFORMATION IN THIS APPLICATION AND ITS ATTACHMENTS ARE TRUE AND CORRECT. THE APPLICANT FURTHERMORE UNDERSTANDS THAT THIS CERTIFICATE SHALL BECOME NULL AND VOID AND OF NO EFFECT ONE (1) YEAR FROM THE DATE OF ISSUANCE UNLESS CONSTRUCTION IS STARTED.

Signature _____ Date _____

****THERE WILL BE NO FEES REFUNDED AFTER RECORDING BY THE TOWNSHIP CLERK****
(Don't Write Below This Line)

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Date Received _____ Fee Paid \$ _____ Check Number _____

Date of Action on Application _____ Approved _____ Denied _____

If Application Is Denied, Reason For Denial _____

Signature of the Zoning Inspector _____