VILLAGE OF ZOAR PLANNING COMMISSION

APPLICATION for (check)

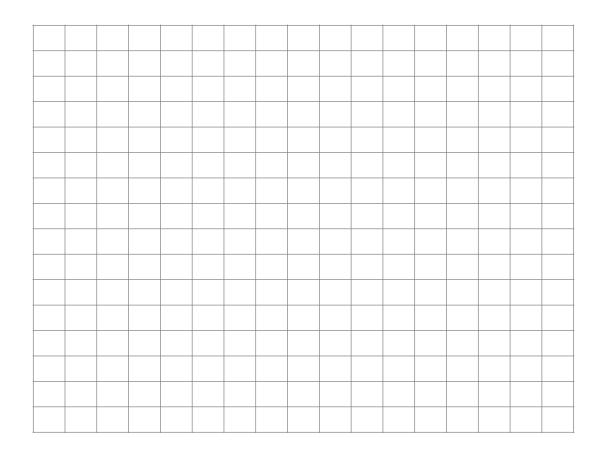
() PROJECT PERMIT

() CERTIFICATE OF APPROPRIATENESS (COA)*

	* Required if the project is located in the Historic District
1.	Application Date
2.	This Application is filed for <i>(check):</i>
	() Construction (house, alteration, accessory building, deck, driveway, pool, etc)() Erection (sign, fence, etc.)
	() Demolition*
	*Demolition of any historic site or landmark must comply with Section 9 of the Historic Preservation Ordinance.
3.	Describe the project:
4.	Describe the project use:
5.	Applicant Information: a) Name
	b) Address (mailing)
	c) Phone (home) (other)

d) Email address _____

6.	Proper																	
		a) I	Locati	on of	premi	ises (s	treet	addre.	ss)									
		b) l	Lot or	Parce	el No.													
		c) A	Adjoin	ing St	reets													
		d) '	Γitle c	wner	of pr	operty	y											
7.	Informa	ation	Requi	remer	nts:													
	a)																e dista	nce
				street on (or		-					· -	-	-	_	ing the	e perti	nent	
				·								•						
	b)	All	applic	ations	for re	siden	tial bu	ildings	s, acce	ssory	buildi	ngs ar	nd oth	er strı	ucture	s shall	l includ	de
		sca	led dr	awing	s for fo	ounda	tions,	plans	for all	floors	s, and	front,	rear a	nd sic	le elev	/ations	S.	
	-1	6				l <i>((Cl</i>		f	C	/	l- :44.			1 - //				
	c)	Cor	npiete	the e	enciose	ea Cr	іеск ц	st jor	Gener	ai Arci	nnecu	ırai St	anaar	as .				



- d) All residential applications shall provide evidence of compliance with the Tuscarawas County Water and Sewer District. For buildings not serviced by a sanitary sewer, a copy of a septic system approval from the Tuscarawas County Board of Health shall be provided.
- e) All applications located *within* the Historic District shall include the necessary information to demonstrate compliance with the objectives and requirements in both the Zoning and Historic Preservation Ordinances. This includes the General and Historic District Architectural Standards; the Secretary of the Interior Standards for Preservation, Rehabilitation, Restoration and Reconstruction; and the Zoar Historic District Design Guidelines.
- f) Applicant shall attach any additional drawings and photographs along with explanatory notes which may be necessary to convey a clear architectural understanding of the project. For construction projects, the illustrative material must include a description of the materials of construction. Illustrations from manufactures' catalogs, color samples, or magazine clippings are acceptable for this purpose.

8.	Cost of Project: \$	<u></u>
9. Secreta		nd all supporting information shall be submitted to the Zoning Officer or along with the application fee.
	IFY THAT THE INFORMATIO	N CONTAINED IN THIS APPLICATION AND ITS SUPPLEMENTS ARE
	RMIT APPLICATION FEE (pa	ayable to the Village of Zoar) OF \$
	DATE	APPLICANT SIGNATURE
	Date	Title Owner of the Property or Approved Agent of the Owner
Permit	applications can be mailed	or hand delivered to any of the contacts below:
Zoning PO Box	of Zoar Officer c 544 OH 44697	Zoning Officer: <u>David Hayes (330) 904-4029</u> Planning Commission: <u>Scott Gordon (330) 936-1338</u>

Village of Zoar

Zoning Requirements Check List General Architectural Standards (Effective in all Zoning Districts)

Note:

^{**}The fourth column shall be completed by the Planning Commission.

Zoning Parameter	Requirement	Applicants Project*	Compliance? (check)**
Building Height	<35 ft max		
Structures	None >12 ft above bldg height		
	None >25% of bldg roof area		
Set Back	>30 ft front		
	>10 ft rear & side		
	>20 ft public right-of-way		
Land Coverage	<20 % lot area for main bldg.		
Dwelling Standards	>1500 sq ft living space		
	>1000 sq ft ground floor area		
	>28 ft length or width		
	8/12 – 10/12 roof pitch		
	All County Board of Health Stds.		
Accessory Buildings	<80 % first floor main bldg area		
	<80% height of main bldg (2 story)		
	< height of single story bldg		
	Enclosed on all sides		
	Made from materials typically used for main building construction		
	Must meet set backs		
	Roof pitch 8/12 – 10/12 or Main Bldg.		
Color	Oversight by PC – N/A to Ag District		

^{*}Applicant must complete the third column with actual values and sign at the bottom.

Swimming Pool	Rigid fence >4 ft high	
	Fence < 4 inches from the ground	
	Fence openings < 4 inches square	
	>4 ft high for above ground pool	
	(or) a power operated pool safety cover	

Signature of Applicant	 Date	
- O	 	

<u>Zonin</u>	g Officer (ZO)
1.	Date application received
2.	() P
	() Sent to HPC () Approved or () Denied () Sent to PC
Zoning	Officer signature and date
Remarl	
<u>Plann</u>	ing Commission (PC)
1.	Date application received by the PC
2.	Date application reviewed by the PC
3.	Date application () approved () denied
Chair o	f PC signature/date
Remark	
Nemair	
<u>Histoi</u>	ric Preservation Commission (HPC)
1.	Date application reviewed for a COA
2.	Date COA application () approved () denied
Chair of	f HPC signature/date
Remark	