

CITY OF WADSWORTH
SITE DEVELOPMENT & ZONING PERMIT APPLICATION
FOR COMMERCIAL, INDUSTRIAL, MULTIFAMILY USES & SIGNS
330-335-2753

ISSUE DATE ___/___/___ PERMIT No. _____
 APPLICANT NAME..... _____ ZONING DISTRICT _____
 JOB ADDRESS..... _____ CITY LOT # _____
 TYPE OF PROJECT..... _____ PARCEL # _____
 OWNER NAME..... _____ PHONE # _____
 CONTACT NAME..... _____ CELL # _____
 GENERAL CONTRACTOR.. _____ EMAIL _____
 CONTRACTOR ADDRESS.. _____
 _____ Street _____ City _____ State _____ Zip Code

ESTIMATED COST OF CONSTRUCTION \$ _____

ZONING PERMIT INFORMATION

*FRONT SETBACK..... _____ USE _____
 *LEFT SETBACK..... _____ USE TYPE: PERMITTED CONDITIONAL
 *RIGHT SETBACK..... _____ DATE OF PLANNING COMM. APPROVAL... _____
 *REAR SETBACK..... _____ DATE OF A.D.C. APPROVAL _____
 HEIGHT ABOVE GRADE..... _____ DATE OF B.Z.A. APPROVAL _____
 (*SETBACKS INCLUDE OVERHANGS, ETC.) IN FLOOD HAZARD AREA?..... YES _____ NO _____

SITE DEVELOPMENT/ZONING FEE COMPUTATION

DEVELOPMENT BASE FEE \$ _____ CP
 TOTAL BUILDING AREA (SQ. FT.) _____ X _____ RATE = \$ _____ CP
 ZONING PERMIT FEE \$ _____ ZP
 SANITARY TAP-IN / CALCULATION + FEE \$ _____ SF
 EXCAVATION - SEWER CONNECTION PERMIT..... \$ _____ SP
 RECREATION ACQUISITION FEE (MULTIFAMILY ONLY) \$ _____ DA
 RECREATION DEVELOPMENT FEE (MULTIFAMILY ONLY) \$ _____ DR
 DEFERRED ASSESSMENT – WATER \$ _____ WD
 DEFERRED ASSESSMENTS - SEWER \$ _____ SD
 OTHER \$ _____
 OTHER \$ _____
TOTAL AMOUNT DUE \$ _____

I HEREBY CERTIFY THAT I AM THE OWNER OF RECORD OF THE NAMED PROPERTY OR THAT I HAVE BEEN AUTHORIZED BY THE OWNER OF RECORD TO MAKE THIS APPLICATION AS HIS AGENT; AND I CERTIFY THAT ALL INFORMATION FURNISHED ON THIS FORM IS ACCURATE; AND AGREE TO CONFORM TO ALL APPLICABLE CODES OF THE JURISDICTION; AND OBTAIN FINAL INSPECTION APPROVAL BEFORE OCCUPANCY OF THE STRUCTURE. I CERTIFY THAT THE CODE OFFICIAL, OR HIS REPRESENTATIVE, SHALL HAVE AUTHORITY TO ENTER AREAS COVERED BY THIS PERMIT AT ANY REASONABLE HOUR TO ENFORCE THE PROVISIONS OF THE APPLICABLE CODES. I UNDERSTAND WHAT INSPECTIONS ARE REQUIRED, AND WHEN, AND HOW TO REQUEST AN INSPECTION.

CALL THE MEDINA CO. BLDG. DEPT. AT 330-722-9220 FOR ALL COMMERCIAL BLDG, ELECTRICAL AND HVAC PERMITS AND INSPECTIONS. CALL MEDINA CO. HEALTH DEPT. AT 330-723-9668 FOR ALL PLUMBING PERMITS AND INSPECTIONS.

 SIGNATURE OF APPLICANT DATE ZONING OFFICIAL / DEPUTY DATE