MUNICIPALITY OF SEBRING
APPLICATION FOR ZONING PERMIT
135 East Ohio Avenue, Sebring, Ohio 44672
clerk@sebringohio.gov

Permit #_____ Date:_____

Application is hereby made by _____
(Name of Owner or Owner's Agent)

For a permit to erect/alter a structure as described in the accompanying plot plan. The accompanying plans and plot plan, and the representation therein contained, are made a part of this application, in reliance upon which, as an inducement therefore, the Municipality of Sebring is requested to issue a Zoning Permit.

Purpose_____ House #_____Street_____
Width_____ Length_____ Square Feet_____ Estimated Cost $_____

Owner Information
Name: _____
Address: _____
Phone: _____
Estimated date of Construction: _____

Contractor Information
Name:_____
Address:_____
Phone: _____
FID/SSN _____
*Contractor shall supply name, address, phone number and FID/SSN for any and all subcontractors Performing work associated with this application.

It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might, or would operate to cause a refusal of this application or any material alteration or change in the accompanying plans made subsequent to the issuance of a permit in accordance with this application, without the approval of the Municipality of Sebring shall constitute sufficient grounds for the revocation of such permit.
NOTE: No building or structure shall be placed on easements or across adjacent lot lines. The applicant shall be responsible for locating easements and lot lines on the property. If a building or structure should be placed in an easement or across a lot line, the owner of the property shall be liable for its removal.

_____ hereby says that he/she is the _____
(Owner or Owners Agent) (Owner or Agent)

Of the described property and that the allegations, representations and statements made I the foregoing application are true. The applicant will also notify the Mahoning County Building Inspector within ten days of completion, requesting the Certificate of Occupancy.

YOU MUST CALL 811 BEFORE DIGGING

_____
Applicants Signature

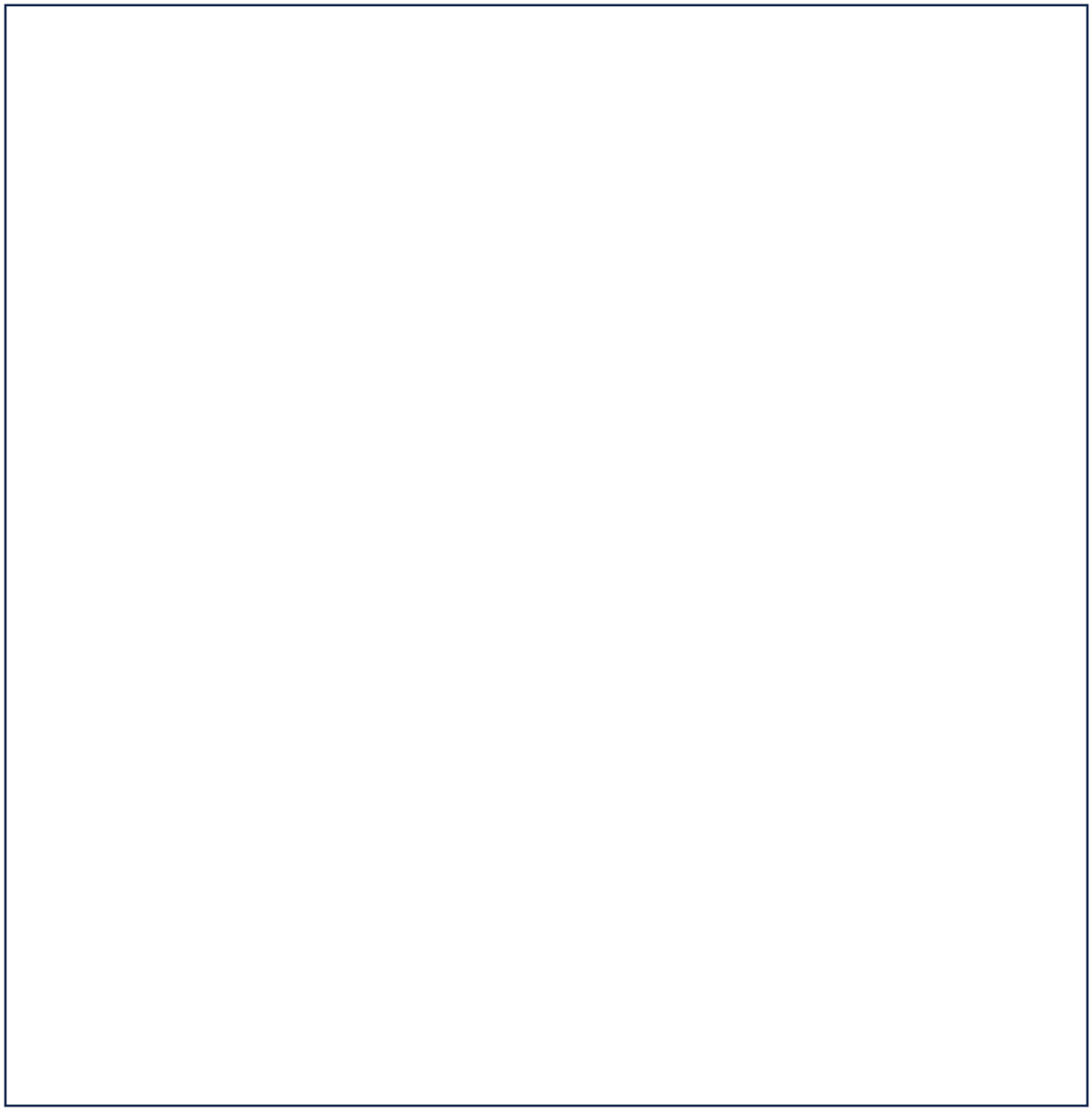
Approved or Disapproved
Manager/Zoning Agent: _____ Date _____ Fee $_____

PLOT PLAN

Sketch of lot showing existing building and proposed construction.

Fill in all dimensions showing all side yard clearance, street, alley and roads.

REAR LOT LINE



FRONT OF LOT

Main Road Frontage _____ **Depth of Lot _____**

Setback from Front Lot Line _____ **Highest Point of Building _____**

Side yard clearance: **Right _____** **Left _____**

Dimensions of Building: **Right _____** **Left _____**