



Zoning Permit Application

Village of Rio Grande, Gallia County, Ohio

Phone: (740) 245-5822

Fax: (740) 245-1704

Zoning Chairman: Bob Shaw

Applicant Information:

Applicant's Name: _____
Applicant's Company (if applicable): _____
Address: _____
Phone: _____
Date of Completed Application: _____

Property Information:

Property Address: _____
Section of Town or Lot Number: _____
Land Owner: _____
Address of Land Owner: _____
Currently Zoned As: _____

Why Do You Require a Permit?

Construction or structural alteration of any building, including accessory buildings. If checked, please specify the type of construction.

☐ New Single Family Dwelling	☐ Alteration or Repair
☐ New Multi-Family Dwelling	☐ Commercial Construction
☐ Accessory Building (Including Sheds)	☐ Industrial Construction
☐ Building Relocation	☐ Other
☐ Existing Building Addition	

☐ Specified projects:

☐ Deck/Porch	☐ Pond
☐ Swimming Pool	☐ Other

☐ Non-residential installation of a fence or other screening device.

Change in use of an existing building or accessory building to a use of a different classification; changed in occupancy and use of vacant land; change of use to different classification; non-conforming use. Explain proposed use or change:

Dwelling, building, or project information (when applicable):

Lot Area (Square Feet):	
Lot Width and Depth (In Feet):	Width: _____ Depth: _____
Proposed Use of Dwelling or Building:	
Front Yard Setback (In Feet):	
Side Yard Setbacks (In Feet and Whichever are Applicable):	North: _____ South: _____ East: _____ West: _____
Rear Yard Setback (In Feet):	
Highest Point of Building Established Above Grade (In Feet):	
Number of Stories:	
Dimensions of Building (In Feet):	Width: _____ Height: _____
Floor Area (In Square Feet) Used for Living Space, Excluding Garages, Carports, Porches, and Basements:	First Floor: _____ Second Floor: _____
Square Footage of Off-Street Parking Area:	
Miscellaneous Information (If Applicable):	Dimensions of Deck/Porch: _____ Depth of Pool/Pond: _____
Additional Applicant Remarks:	

*****A sketch of the land showing the existing buildings and proposed construction or use for which this application is made must be included with the application. For some applications, a complete site plan must be submitted. Refer to the Zoning Ordinance for clarification.*****

Applicant: Please sign and date this application attesting to the truthfulness of the information contained within this application.

Signature

Date Filed

MUNICIPAL USE ONLY

Date Received: _____

Fee Paid/Payment Method: _____

Assigned Application/Permit Number: _____

Application Status: _____ Approved

_____ Denied

Inspected By/Date: _____

Zoning Inspector Remarks: _____

