



VILLAGE OF MORROW

WARREN COUNTY, OHIO

150 East Pike Street, Morrow, Ohio 45152

Telephone: 513.899.2821 Facsimile: 513.899.3170

www.vil.morrow.oh.us

Zoning Permit Application

Receipt Number: _____

Lot File: _____

Please select the permit(s) for which you are applying:

Certificate of Zoning Compliance: _____

Sign Permit: _____ Sidewalk, Curb, Gutter, or Driveway Construction Permit: _____

Fence Permit: _____ Street Tree Permit: _____

Accessory Structure: _____ Pool Permit: _____

Horse Drawn Vehicle Permit: _____ Demolition Permit: _____

Conditional Use Permit: _____ Temporary Use Permit: _____

Floodplain Permit: _____ Planned Unit Development Permit: _____

Variance Request: _____ Zoning Amendment / Rezoning: _____

Other: _____

Square footage of work to be performed: _____

Applicant / Contractor Information:

Name: _____ Address: _____

Home Phone: _____ Office Phone: _____ Cell Phone: _____

Email Address: _____

Property Owner Information:

Name: _____ Address: _____

Home Phone: _____ Office Phone: _____ Cell Phone: _____

Email Address: _____

Address of work to be done: _____, Morrow, Ohio 45152

Lot # _____

Has the property owner consented to this work being performed: Yes _____ No _____

Fee:

A fee, as stipulated by ordinance, shall be paid by the applicant to cover the costs of administrative review, public notice (if necessary), recording, filing, and other costs associated with the permit process, prior to the consideration of this zoning permit application. All fees shall be made payable to: "Village of Morrow."

Fee Amount: \$ _____ Paid: Yes _____ No _____ Cash / Charge / Check No. _____

I hereby certify under penalty of law that the information submitted as part of this zoning permit application and its attachments are true and correct, and that I have been duly authorized by the property owner to submit this application.

Signature of Property Owner or Authorized Agent

Date Submitted

Action of Planning Commission / Board of Zoning Appeals / Morrow Village Council (attach meeting minutes):

Application Approved: _____

Application Approved with the Conditions: _____ (attach conditions)

Application Denied / Revise & Resubmit: _____

Date of Issuance: _____ Expiration Date (if applicable): _____

Action of the Zoning Inspector:

Certificate of Occupancy confirmed through Warren County Building Department: Yes _____ No _____

Application Approved: _____

Application Approved with the Conditions: _____ (attach conditions)

Application Denied / Revise & Resubmit: _____

Date of Issuance: _____ Expiration Date (if applicable): _____

Zoning Inspector Signature

Date

Routing: Original – Applicant / Contractor
 Copy – Property Owner (if other than Applicant or Contractor)
 Copy – Warren County or other government agency (if necessary)
 Copy – Village of Morrow Lot File