



ZONING CERTIFICATE APPLICATION

FAIRFIELD TOWNSHIP PLANNING & ZONING DEPARTMENT
 6032 MORRIS ROAD • FAIRFIELD TOWNSHIP, OHIO 45011
 PHONE (513)-887-4400 • FAX (513)-887-4405

PROPERTY ADDRESS		FOR OFFICE USE ONLY APPLICATION: # 21 - _____ DATE RECEIVED: _____ RECEIPT: # _____ FEE AMOUNT: \$ _____	
ZIP _____	PARCEL # A0300- _____		LOT # _____
APPLICANT _____	PHONE _____		EMAIL _____
ADDRESS _____	CITY, STATE, ZIP _____		
PROPERTY OWNER _____	PHONE _____	EMAIL _____	
ADDRESS _____	CITY, STATE, ZIP _____		
CONTRACTOR _____	PHONE _____	EMAIL _____	
ADDRESS _____	CITY, STATE, ZIP _____		
COMMERCIAL JEDD DISTRICT: <input type="checkbox"/> YES <input type="checkbox"/> NO END USER _____ CHECK ALL THAT APPLY: <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> TENANT FINISH/REMODEL <input type="checkbox"/> NEW USE <input type="checkbox"/> WALL SIGN <input type="checkbox"/> FREE STANDING SIGN <input type="checkbox"/> TEMPORARY SIGN <input type="checkbox"/> FENCE (MATERIAL: _____ HEIGHT: _____) <input type="checkbox"/> TEMPORARY EVENT <input type="checkbox"/> OTHER: _____			
		TOTAL SQUARE FOOTAGE _____	
RESIDENTIAL CHECK ALL THAT APPLY: <input type="checkbox"/> ADDITION/REMODEL <input type="checkbox"/> DECK <input type="checkbox"/> FENCE (MATERIAL: _____ HEIGHT: _____) <input type="checkbox"/> NEW CONSTRUCTION <input type="checkbox"/> IN-GROUND POOL <input type="checkbox"/> ABOVE-GROUND POOL <input type="checkbox"/> DETACHED GARAGE <input type="checkbox"/> ACCESSORY BUILDING <input type="checkbox"/> OTHER _____			
		TOTAL SQUARE FOOTAGE _____	

DESCRIPTION OF CURRENT LAND USE AND EXISTING STRUCTURES: _____

DESCRIPTION OF PROPOSED PROJECT: _____

IT IS THE RESPONSIBILITY OF THE OWNER/APPLICANT TO COMPLY WITH ANY AND ALL CIVIL DEED AND/OR SUBDIVISION RESTRICTIONS AND COVENANTS.

I hereby apply for a zoning certificate from Fairfield Township. I affirm that all information provided herewith is true and correct, and that I am authorized to make this application. I understand and agree that any zoning certificate issued may be revoked if error, omission or misrepresentation occurred concerning this application.

Applicant	Date	Owner	Date
NON-REFUNDABLE FEE DUE AT TIME OF APPLICATION SUBMITTAL			