



ZONING CERTIFICATE APPLICATION

FAIRFIELD TOWNSHIP ZONING DEPARTMENT
6032 MORRIS ROAD • FAIRFIELD TOWNSHIP, OHIO 45011
PHONE (513)-785-2266 • FAX (513)-887-4405

PROPERTY ADDRESS ZIP _____ PARCEL # A0300- _____ LOT # _____			FOR OFFICE USE ONLY APPLICATION: # 19 - _____ FEE AMOUNT: \$ _____ DATE RECEIVED: _____ RECEIPT: # _____
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"/> 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
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NON-REFUNDABLE FEE DUE AT TIME OF APPLICATION SUBMITTAL