



# CITY OF HURON

Zoning Department  
413 Main Street  
Huron, Ohio 44839  
419-433-3544  
419-433-4318 fax  
[www.cityofhuron.org](http://www.cityofhuron.org)



## ZONING PERMIT APPLICATION

### Property Owner:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: (\_\_\_\_) \_\_\_\_\_

### Contractor:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone # (\_\_\_\_) \_\_\_\_\_

### Location of Project

Street Address: \_\_\_\_\_

Lot #: \_\_\_\_\_

Parcel #: \_\_\_\_\_

### Project Description:

Addition/Remodeling       Renovation       New Construction       Other

Building Use: Residence  Single Family  Two Family  Three Family  Other: \_\_\_\_\_

Area of Project: \_\_\_\_\_ sq. ft. (Round up to the next 100 sq. ft.)

Estimated Cost of Project: \$ \_\_\_\_\_

## ZONING

• Zoning District: R-1 R-1-A R-2 R-3 B-1 B-2 B-3 P-1 I-1 I-2 M

• Flood Zone of Property: AE VE X (Shaded) X

• Projects within any of the zones, with the exception of the X zone, requires a Flood Elevation Certificate



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**Setbacks:** (Required for all new structures and additions)

Front Yard: \_\_\_\_\_ ft. (for new structures only)

Front yards of adjoining structures: right \_\_\_\_\_ ft. left \_\_\_\_\_ ft.

Side Yards: right \_\_\_\_\_ ft. left \_\_\_\_\_ ft.

Rear Yard: \_\_\_\_\_ ft.

(All of the above measurements shall be from the property line)

**Overall height of the proposed structure:** \_\_\_\_\_ ft from final grade

**A complete site plan must accompany this application showing existing and proposed buildings on the property, and their distances to all property lines**

- **This project is non-structural and does not involve increasing the footprint of the building**  
\*\*\*\*\*



Date of Submittal: \_\_\_\_\_  
Site Plan Submitted: Yes No  
Plans Submitted: Yes No  
Received By: \_\_\_\_\_

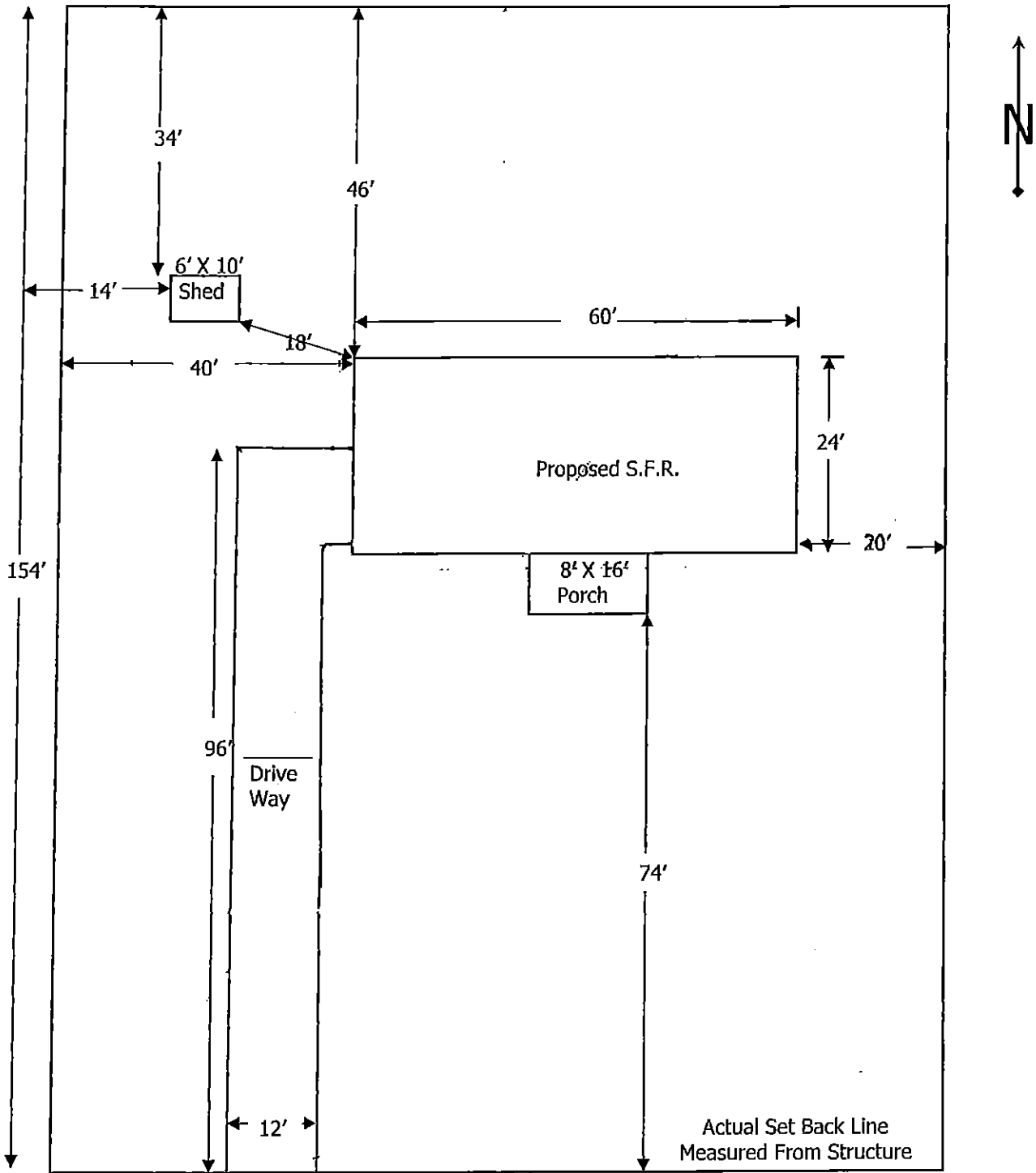
Plans approved: \_\_\_\_\_ Denied: \_\_\_\_\_  
Permit # & Date: \_\_\_\_\_

Denial  
Explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# EXAMPLE SITE PLAN

Parcel Number: 00 - 00 - 00 - 0000 - 0000 - 0000

120'



100 First Street

Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_

Name of Preparer: \_\_\_\_\_

Zoning: \_\_\_\_\_

THIS PLOT IS TRUE AND ACCURATE:

(Signature of Applicant or Agent) \_\_\_\_\_ DATE: \_\_\_\_\_