

City of Huron
 Planning and Zoning Department
 417 Main St. Huron, Ohio 44839
 P: 419-433-5000
 F: 419-433-5120



Commercial Site Plan Application

Property Owner

Name: _____
 Address: _____
 Phone: _____
 Email: _____

Applicant

Name: _____
 Company/Business Name: _____
 Mailing Address: _____
 Phone: _____
 Email: _____

Location and Description of Project

Address: _____ County Parcel #: _____
 Existing Use: _____ Acreage/Area of Site: _____
 Proposed Use: _____ Lot # (if applicable): _____
 Estimated Value of Project: _____

New Construction Demolition
 Addition to Existing Structure Other: _____

Zoning District:	R-1	R-1A	R-2	R-3	B-1	B-2	B-3	I-1	I-2	P-1	M
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Flood Zone:	A	AE	AO	AH	X (shaded)	X	(Definitions 1135.02(14))
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Description of Proposed Project: _____

***A complete site plan must accompany this application. The site plan must include the following information:**

- ___ Dimensions of the Lot
- ___ Size and Location of the Existing Structure (if applicable)
- ___ Size and Location of the Proposed Structure
- ___ Front, Rear, and Side Setbacks of Existing Structure (if applicable)
- ___ Front, Rear, and Side Setbacks of Proposed Structure
- ___ Height of the Proposed Structure
- ___ Location of Sidewalks, Driveways, Drive Aisles, Parking Areas (with markings), Fire Lanes
- ___ Location of all utility connections and infrastructure
- ___ Plan for any curb cut/apron connection to public street

***A complete drainage plan must be included for projects that result in grading, paving, site modification, or new construction.**

_____ I hereby certify that I am the owner of record of the named property or that the proposed work is authorized by the owner of record and/or I have been authorize to make this application as an authorized agent, and we agree to conform to all applicable laws, regulations, and ordinances. All information contained within this application and supplemental materials is true and accurate to the best of my knowledge and belief.

Applicant Signature: _____ Date: _____
 Owner Signature: _____ Date: _____

For Departmental Use Only:

Date of Submission:		PC Meeting Date:	
Site Plan Included:		Decision and Date:	
Drainage Plan Included:		Zoning Permit #:	

Site Plan Application Fee (\$150): _____
Zoning Permit Fee: _____

Date Paid: _____
Date Paid: _____

Denial Explanation: _____

