

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



## Residential Zoning Permit Application

### Property Owner

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

Address, City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Contractor (must be registered with the City of Huron)

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

Address, City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Location of Project

Address: \_\_\_\_\_ County Parcel Number: \_\_\_\_\_ Lot #: \_\_\_\_\_

### Zoning District & Flood Zone Designation

<b>Zoning District:</b>	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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<b>Flood Zone:</b>	A	AE	AO	AH	X (shaded)	X	(Definitions 1135.02(14))
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### Project Information

New Construction: \_\_\_\_

Deck/Porch: \_\_\_\_

Addition to Existing Structure: \_\_\_\_

Swimming Pool \_\_\_\_

Detached Garage/Shed/Storage: \_\_\_\_

Demolition: \_\_\_\_ Height of Structure: \_\_\_\_

Fence: \_\_\_\_ Linear Ft.: \_\_\_\_

Other: \_\_\_\_\_

Description of proposed project: (include square footage and height)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated Value of Proposed Project: \$ \_\_\_\_\_.

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

- \_\_\_ Dimensions of the Lot /Property Lines, measurements from the property lines to the foundation
- \_\_\_ Size and Location of the Existing Structure(if applicable)
- \_\_\_ Size, Location and Height of the Proposed Structure
- \_\_\_ Front, Rear, and Side Setbacks of Existing Structure(if applicable)
- \_\_\_ Front, Rear, and Side Setbacks of Proposed Structure
- \_\_\_ Dimensions from existing structures to the Proposed Structure
- \_\_\_ Height of the Proposed Structure or Structure to be demolished. (if applicable)
- \_\_\_ Location of Sidewalks and Driveways (if applicable)
- \_\_\_ Height of Fence (front yard 4' max; side and rear yards 6' max)

**STORMWATER PLAN:** Contact the City Engineer for plan detail required: 419-433-5000 ext. 1103

- \_\_\_ Grading/drainage plan for all new construction & additions.

**SURVEY OR PLAT MAP:**

- \_\_\_ A survey map or plat must be provided with the application.

\_\_\_\_\_ 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 authorized 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.

**Incomplete applications will not be accepted, please complete all applicable sections and include specified plans as listed above.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

PLEASE NOTE, DO NOT APPLY FOR PERMITS UNLESS YOU ARE READY TO BEGIN YOUR PROJECT WITHIN 6 MONTHS. PERMITS FEES ARE DUE AND PAYABLE AT THE TIME OF ISSUANCE AND ARE NON-REFUNDABLE. ZONING PERMITS EXPIRE 12 MONTHS FROM DATE OF ISSUANCE. IF YOUR PROJECT REQUIRES A BUILDING PERMIT, SUBMIT THE BUILDING PERMIT APPLICATION AND REQUIRED PLANS WITH THIS APPLICATION.

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**For use by City of Huron Zoning Department:**

Date of Submission: \_\_\_\_\_ Required Plans Included?: \_\_\_\_\_

Comments/Additional Information requested: \_\_\_\_\_

Denial date and reason: \_\_\_\_\_