RESIDENTIAL
ZONING PERMIT APPLICATION

NOTE: All applications are reviewed by the Department of Planning and Development for completeness per LCO § 1132.04 prior to being processed. Applications that are incomplete will **not** be accepted.

CITY OF LEBANON OHIO
Department of Planning and Development
50 S. Broadway • Lebanon, Ohio 45036
(513) 228-3171 • FAX: (513) 932-2493

PLEASE PRINT CLEARLY

I. PROPERTY INFORMATION

Property Address:	**Parcel Number (SIDWELL):**
Owner Name:	**Phone No.:**
Owner Address:	**City, State, Zip Code:**
Occupant Name (if different from owner):	**Phone No.:**
Contractor:	**Phone No.:** / **Fax:**
Contractor Address:	**City, State, Zip Code:**

II. PROJECT INFORMATION

STRUCTURE PERMIT Site plan / construction drawings required	ACCESSORY STRUCTURE PERMIT Site plan / construction drawings required	ZONING REVIEW ONLY Site plan required
☐ New Residential Structure	☐ Detached Garage	☐ Fence; height _____
☐ Single–family ☐ Two–family	☐ Addition to Detached Garage	Yard: ☐ Rear ☐ Side ☐ Front
☐ Multi–family		Describe fence design / materials:
☐ Room Addition	☐ Shed; > 200 sq. ft.	_____
☐ Attached Garage	☐ Gazebo	☐ Shed; < 200 sq. ft.
☐ Interior Alteration	☐ Deck	☐ Retaining Wall; < 48" or lower
☐ Patio Enclosure	☐ Swimming Pool	☐ Driveway
☐ Porch	☐ Ramp	☐ Patio Slab
☐ Demolition	☐ Retaining Wall; > 48" or higher	☐ Home Occupation
☐ Other _____	☐ Other _____	☐ Other _____
Cost of Project $_____	Cost of Project $_____	Cost of Project $_____

ADDITIONAL PROJECT INFORMATION

_____

_____

III. OWNER'S CERTIFICATION AND SIGNATURE

I hereby certify that I am the owner of the subject property, have read and understand the contents of this application; and that all information contained in this application, attached exhibits and other information submitted is complete and in all respects true and correct, to the best of my knowledge and belief.

_____ _____ _____

Property Owner Signature **Print Name** **Date**

DEPARTMENT USE ONLY

RZPA-2009

Zoning District: _____ **Lot area:** _____ **S.F. / D:** _____x_____

Overlay District: ☐ Yes ☐ No **Structure size: W** _____ **L** _____

Historic District: ☐ Yes ☐ No **S.F.** _____ **Hgt.** _____

Floodplain: ☐ Yes ☐ No **Setbacks: FY** _____ **RY** _____

COA Req'd (PC): ☐ Yes ☐ No **LSY** _____ **RSY** _____

Comments: _____

_____

Application No.: _____

Fee: _____ **Receipt No.:** _____

☐ **APPROVED** ☐ **DENIED**

☐ **APPROVED W/ CONDITIONS**

Reviewed by: _____

Date: _____ **Permit No.:** _____