

Permit No: \_\_\_\_\_

Date: \_\_\_\_\_

**MUNICIPALITY OF SEBRING**  
**APPLICATION FOR ZONING PERMIT**  
**135 East Ohio Avenue, Sebring, Ohio 44672**  
**330-938-9340**

Application is hereby made by \_\_\_\_\_  
(Name of Owner or Owner's Agent)

for a permit to erect/alter a structure as described in the accompanying plot plan. The accompanying plans and plot plan, and the representation therein contained, are made a part of this application, in reliance upon which, as an inducement therefore, the Municipality of Sebring is requested to issue a Zoning Permit.

Purpose \_\_\_\_\_ Frame \_\_\_\_\_ Brick \_\_\_\_\_ C.B. \_\_\_\_\_ Other \_\_\_\_\_

Width \_\_\_\_\_ Length \_\_\_\_\_ Height \_\_\_\_\_ Square Feet \_\_\_\_\_ Estimated Cost \_\_\_\_\_

Lot No. \_\_\_\_\_ House No. \_\_\_\_\_ Street \_\_\_\_\_

Zoning District \_\_\_\_\_ Plat \_\_\_\_\_

*Owner Information:*

*Contractor Information:*

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

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

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

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

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

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

Estimated Date of Construction: \_\_\_\_\_

FID / SSN \_\_\_\_\_

**\*\*Contractor shall supply name, address, phone number and FID/SSN for any and all subcontractors performing work associated with this application.**

It is understood and agreed by this applicant that any error, misstatement or misrepresentation of material fact, either with or without intention on the part of this applicant, such as might, or would operate to cause a refusal of this application or any material alteration or change in the accompanying plans made subsequent to the issuance of a permit in accordance with this application, without the approval of the Municipality of Sebring shall constitute sufficient grounds for the revocation of such permit.

**NOTE: No building or structure shall be placed on easements or across adjacent lot lines. The applicant shall be responsible for locating easements and lot lines on the property. If a building or structure should be placed in an easement or across a lot line, the owner of the property shall be liable for its removal.**

\_\_\_\_\_ hereby says that he/she is the \_\_\_\_\_  
(Name of Owner or Owner's Agent) (Owner or Owner's Agent)

of the described property and that the allegations, representations and statements made in the foregoing application are true. The applicant will also notify the Municipality of Sebring's Building Inspector within ten days of completion, requesting the Certificate of Occupancy.

\_\_\_\_\_  
Applicant's Signature

APPROVED

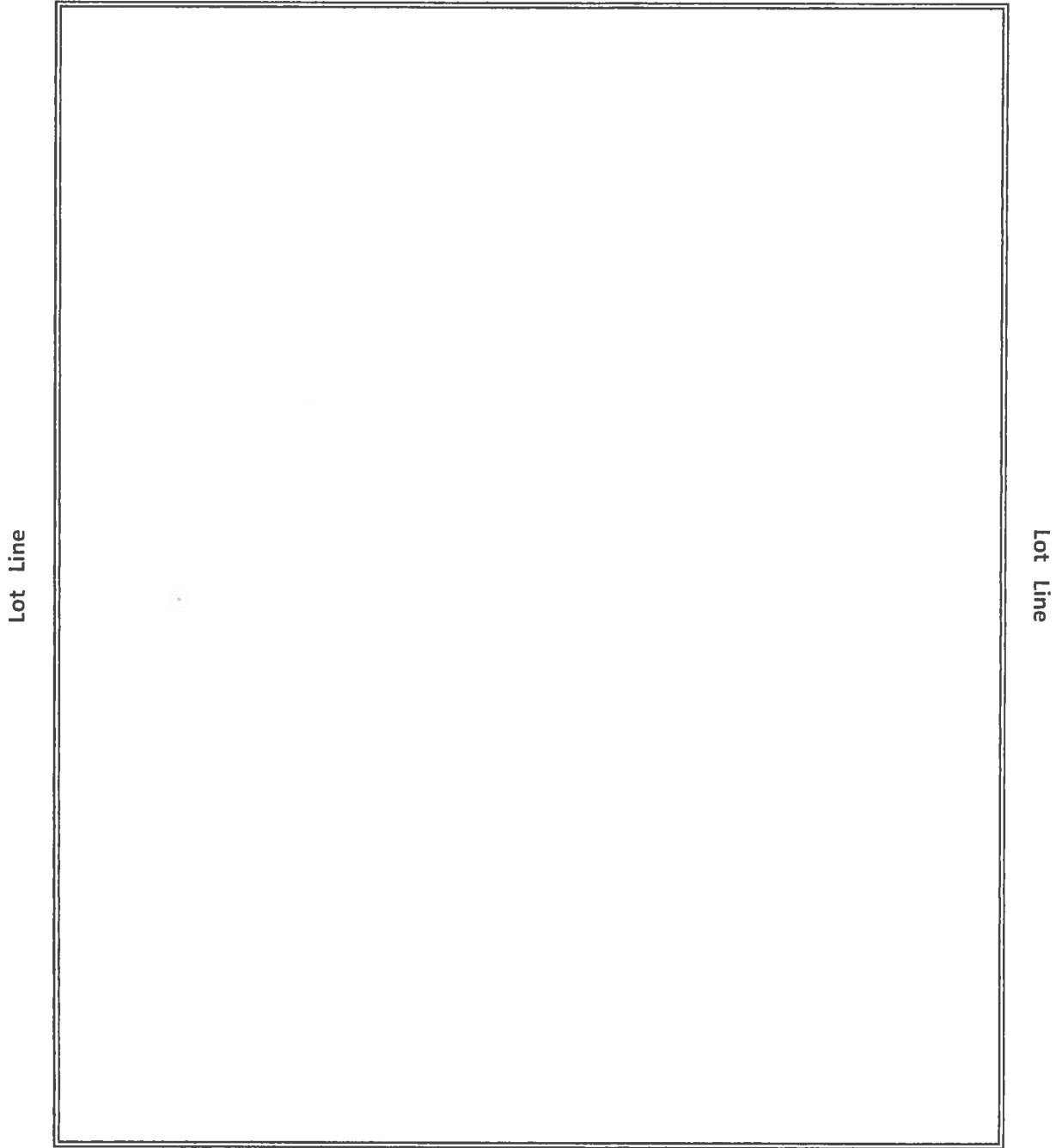
DISAPPROVED \_\_\_\_\_ Date \_\_\_\_\_ Fee Paid \$ \_\_\_\_\_

**NOTE: If for some reason this application is disapproved, the Zoning Inspector will notify the applicant in writing stating the reasons for disapproval. Disapproved applications will be filed in the same manner as approved applications with copies of letter for reasons of disapproved attached.**

# PLOT PLAN

Sketch of lot showing existing building and proposed construction.  
Fill in all dimensions showing all side yard clearances, street and roads.

REAR LOT LINE



FRONT LOT LINE

Main Road Frontage \_\_\_\_\_

Depth of Lot \_\_\_\_\_

Setback from Front Lot Line \_\_\_\_\_

Highest Point of Building \_\_\_\_\_

Side yard clearance: Right \_\_\_\_\_ Left \_\_\_\_\_

Dimensions of Building: Length \_\_\_\_\_ Width \_\_\_\_\_