

Application for Zoning Permit for Deck

Date: _____

**VILLAGE OF LAGRANGE
355 SOUTH CENTER STREET
LAGRANGE, OHIO 44050**

**Zoning Clerk: Ron Harmon
(440) 355-5555 Fax (440) 355-5250**

To the Village of LaGrange,

The undersigned hereby applies for a zoning certificate for the following use, to be issued on the basis of the representations contained herein, all of which the applicant certifies as true and correct:

Property Owner _____

Mailing address _____ City _____

Phone # _____ Fax # _____

Applicant Name _____

Mailing address _____ City _____

Phone # _____ Fax # _____

Location Address _____ Zoning District _____

Permanent Parcel # _____

Estimated Cost _____ Contractor _____

Please attach the following:

1. A scaled drawing of the location of the deck and all buildings with dimensions of each .
2. Include all property lines and the deck's distance from them.
3. Include distance from deck to other buildings.
4. A description of the deck, including if there will be a roof and/or railings.

It is the responsibility of the property owner to determine the property line through location of property pins.

In addition to the information provided heron, the applicant for this zoning certificate shall provide all necessary drawings, notes, specifications, approvals, and other necessary information as required by the Village of LaGrange Zoning Code and Subdivision Rules and Regulations.

Application fee of \$35.00 is due to the Village of LaGrange at the time of the application.

You are to call for inspection after the deck is staked out and before construction begins.

An electrical inspection certificate from a Certified Electrical Inspector must be submitted to the Village if electricity is run to the deck..

This permit shall become void if work is not started within one year and/or substantially completed within two and one-half years of the date of issuance.

I agree that the deck will meet all requirements of the appropriate and applicable sections of the Village of LaGrange Zoning Ordinance, as amended. If not, describe:

Applicant

Date Received _____

Zoning Clerk

Fee paid: _____

Check # _____

Receipt # _____

Permit issued on _____

Comments: _____

If application is rejected, reason for rejection: _____
