

Application Number (office use):	
Application Date (office use):	

\$50.00 Zoning Certificate Application/Residential Exterior Improvements

1. Applicant Information	
Owner Name / Contact:	Phone No.
Contractor Street Address:	Alt. Phone
Other City, State Zip:	Fax No.
E-Mail Address:	
2. Project Information	
Property/Site Address:	Corner Lot?
Lot Width: Lot Depth: Lot Squa	re Footage:
Project Type:	rage
Project Setbacks: Front (ft.) Side (ft.)	Rear (ft.) Project Height:
Project Exterior Materials:	Construction Cost:
	TION DRAWINGS OR USE ATTACHED SITE PLAN DRAWINGS.
3. Applicant Certification	
I/we hereby agree to conform to the City of Cuyahoga Falls	General Development Code. I also hereby certify that all statements ave a legal right to make this application or to possess a written power
Signature	Date
4. Office Use (only)	
Approved (requires stamp) Denied (state reasons)	Cash
	Check Check #:
	☐ MC/Visa/Discover Card #:
	Final Inspection Approval Date:
	Signature
	Comments:

330-971-8135

Walls Setbacks Front: Rear: Left Side: Primary Structure			Back Lot	Line Width			
Front: Rear: Left Side: Right Side: Existing New New New Walls Setbacks Front: Rear: Left Side: Right Side: Right Side: Right Side: Right Side:			1				
Rear: Left Side: Right Side: Existing New	Walls	Setbacks					
Left Side: Right Side: Existing New New Malls Setbacks Front: Rear: Left Side: Right Side:	Front:						
Right Side: Existing New	Rear:						
Right Side: Existing New	Left Side:						
Accessory Structure Walls Setbacks Front: Rear: Left Side: Right Side:							
Accessory Structure Walls Setbacks Front: Rear: Left Side: Right Side:							
Walls Setbacks Front: Rear: Left Side: Right Side:							
Walls Setbacks Front: Rear: Left Side: Right Side:	Accessor	ry Structure		rimary S	tructure		
Front: Rear: Left Side: Right Side:				illiary 3	tructure		
Front: Rear: Left Side: Right Side:							
Rear: Left Side: Right Side:				Walls	Setbacks		
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Right Side:				Rear:			
				Left Side:			
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