

# Warren County Rural Zoning Application

406 Justice Dr., Rm 170, Lebanon, Oh 45036

Phone (513) 695-1294

wczoning@co.warren.oh.us

Permit # \_\_\_\_\_

**CONSTRUCTION SITE INFO** COMMERCIAL \_\_\_\_\_ RESIDENTIAL \_\_\_\_\_ AGRICULTURAL \_\_\_\_\_

Address of construction \_\_\_\_\_

Parcel ID/Sidwell \_\_\_\_\_ Subdivision \_\_\_\_\_ Lot# \_\_\_\_\_ Township \_\_\_\_\_

### Owners

Information

Name Mailing Address City, State, Zip Code Phone

Owner's email \_\_\_\_\_

### Applicant's

Information

Name Address City, State, Zip Code Phone

### TYPE OF ZONING REQUEST (Check all that apply)

Single Family Residence → NEW \_\_\_\_\_ REMODEL \_\_\_\_\_ ADDITION \_\_\_\_\_

Swimming pool → IN-GROUND \_\_\_\_\_ ABOVE GROUND \_\_\_\_\_

Deck \_\_\_\_\_

Accessory building → SHED \_\_\_\_\_ GARAGE \_\_\_\_\_ POLEBUILDING \_\_\_\_\_

Temporary trailer DATE TO BE REMOVED \_\_\_\_\_

Sign → BILLBOARD \_\_\_\_\_ OTHER \_\_\_\_\_

Tower → TELECOMUNICATION \_\_\_\_\_ ANTENNA \_\_\_\_\_ WIND TURBINE \_\_\_\_\_ HAMM RADIO \_\_\_\_\_

Other (explain) \_\_\_\_\_

SIZE OF PROPOSED STRUCTURE
STRUCTURE HEIGHT

### SITE PLAN INFORMATION

### DISTANCES FROM PROPERTY LINES TO PROPOSED

LOT  
Width \_\_\_\_\_ Depth \_\_\_\_\_ # of Acres \_\_\_\_\_ Front \_\_\_\_\_ Rear \_\_\_\_\_ Side \_\_\_\_\_ Side \_\_\_\_\_

The undersigned hereby certifies that all information and attachments to this application are true and correct. The undersigned is required, in addition to the information requested on this form to submit a plan showing the actual dimensions and shape of the lot, sizes and locations of existing buildings on the lot; and the location and dimensions of the proposed buildings or alterations. The undersigned agree, covenants, represents, and warrants that the proposed buildings or alterations shall be built as indicated herein and as illustrated on the plan required to be attached hereto. Said zoning permit to be issued on the basis of the information contained within this application and the plan attached hereto. **Also, the said zoning permit is to expire in 1 year from the approved date below.**

Owner's Name \_\_\_\_\_ Signature of Owner \_\_\_\_\_ Date \_\_\_\_\_  
(Please print)

Office use below line

Date Approved \_\_\_\_\_ Date Denied \_\_\_\_\_ Inspector \_\_\_\_\_ Zoning Class \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_