

OFFICE USE ONLY		<input type="checkbox"/> PAID
Date Received:	Permit #:	
Staff Initials:	Penalty Fee: <input type="checkbox"/> YES <input type="checkbox"/> NO	

OUTBUILDING PERMIT APPLICATION

PROPERTY INFORMATION

Street Address or Parcel Number:	
Check one: <input type="checkbox"/> Shed <input type="checkbox"/> Detached garage <input type="checkbox"/> Detached carport	<input type="checkbox"/> Pavilion <input type="checkbox"/> Gazebo <input type="checkbox"/> Other:
Description of project:	
What is the total value of this project?	
Was there a variance obtained for this project? <input type="checkbox"/> Yes Case #: _____ <input type="checkbox"/> No	

APPLICANT INFORMATION

Applicant's Name <i>(May be property owner, contractor, architect, etc.):</i>	
Applicant's Address:	
Phone(s):	Email:
Property Owner's Name <i>(If different from applicant):</i>	
Property Owner's Address:	
Phone(s):	Email:

OUTBUILDING INFORMATION

Corner Lot: <input type="checkbox"/> Yes <input type="checkbox"/> No <ul style="list-style-type: none"> ▪ If the property is a corner lot a shed may be placed no nearer than 20 ft. from the property line located near the street. <ul style="list-style-type: none"> ○ The property line is not the curb line. ○ It is the responsibility of the property owner to know where their property lines are located. 	
Rear Setback: _____ <i>(Minimum of 5 ft.)</i>	
Side Setback: _____ <i>(Minimum of 5 ft.)</i>	
Total Square Feet: _____ <i>(Garage Max.: 676 Sq. ft. Shed Maximum: 225 Sq. ft.)</i>	
Length:	
Width:	
Height: _____ <i>(Maximum height 16ft.)</i>	
<u>Fees:</u> <input type="checkbox"/> Shed/ Detached Carport/Pavilion _____ x \$.25= \$ _____ Total Sq. Ft. <input type="checkbox"/> Garage _____ x \$.36= \$ _____ Total Sq. Ft. <b style="color: #8B0000;">Fees will be rounded up to the next dollar.	<input type="checkbox"/> Gazebo \$25.00
Requires site plan.	

The undersigned hereby certifies that the information in and with this application is true and accurate, and consents to agents of the township entering the premises for inspection and verification of information submitted, as applicable; and if a permit is issued, to verify conformance to requirements and conditions of issuance.

 **Signature of Applicant:** _____ **Date:** _____

REQUIRED FOR RENTAL PROPERTIES	
Property Owner / Landlord Approval <input type="checkbox"/> I HAVE REVIEWED AND APPROVED THE INSTALLATION OF THE PERMANENT STRUCTURE DESCRIBED HEREIN.	
Signature of Property Owner: _____	Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

FORMS OF PAYMENT ACCEPTED:

- Exact cash
- Check (Make payable to Boardman Township)
- Credit (Visa, MasterCard, or Discover)
(Note: If you pay via credit or debit card, your statement will include a separate 2.95% or \$2.50 minimum service fee with this transaction. This fee is assessed by the credit card processor, not the Township)

PLEASE MAIL COMPLETED APPLICATIONS TO:

Boardman Township Zoning Department
8299 Market Street
Boardman, Ohio 44512

OR EMAIL:

Julie Pitzer at Jpitzer@Boardmantwp.com

REVISED: 3/18/2019