

OFFICE USE ONLY		<input type="checkbox"/> PAID
Date Received:	Permit #:	
Staff Initials:	Zoning:	

PARKING LOT APPLICATION

PROPERTY INFORMATION
Street Address or Parcel Number:
Description of project:
What is the total value of this project?
Was there a variance obtained for this project? <input type="checkbox"/> Yes <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>	
Phone(s):	Email:
Property Owner's Address:	

PARKING LOT INFORMATION
Total Square Feet:
Fee: \$100.00
Site Plan Required.

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:** _____

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:

To Julie Pitzer at Jpitzer@Boardmantwp.com

REVISED: 3/18/2019