



# BEAVERCREEK TOWNSHIP ZONING

851 Orchard Lane  
Beavercreek, Ohio 45434  
(937) 306-0065 Fax: (937) 426-8780

Ed Amrhein  
Planning & Zoning Administrator

Laurie Brown  
Zoning Inspector/  
Code Enforcement Officer

## ZONING PERMIT FOR NON-RESIDENTIAL ADDITION (Effective 4/7/17)

Permit No. \_\_\_\_\_

\*Permit Fee: \$ \_\_\_\_\_  
(\*Up to 1000 sq. ft. = \$100; over 1000 sq. ft. = \$200)

Zoning District \_\_\_\_\_ Parcel ID#: \_\_\_\_\_

Location of property: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Size of addition: \_\_\_\_\_ ft. x \_\_\_\_\_ ft. = \_\_\_\_\_ sq. ft.

Height of addition: \_\_\_\_\_ ft.

► **No part of the addition is to enter into the front yard, side yard, or rear yard setbacks** ◀

**Contact Greene County Building Regulations at 667 Dayton-Xenia Rd. or 937-562-7420 to see what they require for their permit.**

I hereby certify that all of the information supplied in this application and attachments hereto are true and correct to the best of my knowledge, information and belief. I hereby consent to the inspection of the subject property, and of any buildings or structures to be constructed thereon, by the Township Zoning Inspector. I hereby acknowledge that I understand that if the construction or use described in the zoning permit has not begun within six (6) months from the date of issuance, said zoning permit shall become null and void.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\*\*\*\*\*

BZA approval required \_\_\_\_\_ Case #: \_\_\_\_\_

Upon the basis of Application No. \_\_\_\_\_, the information contained within is made a part hereof, the proposed usage is **found / not found** to be in accordance with the Township Zoning Resolution and is hereby **approved / not approved**.

\_\_\_\_\_ Date permit issued: \_\_\_\_\_  
Zoning Inspector/Code Enforcement Officer

<b><u>FOR OFFICE USE ONLY</u></b>	
Date inspection called for: _____	Date inspected: _____
Zoning Official's Name: _____	