



City of
BELPRE
OHIO

715 Park Drive PO Box 160 Belpre OH 45714 740.423.7592 www.cityofbelpre.com

CITY OF BELPRE ZONING PERMIT APPLICATION

PROJECT ADDRESS: _____

PROPERTY OWNER: _____

OWNER ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

CONTRACTOR: _____

ADDRESS: _____

PHONE: _____

REASON FOR
PERMIT: _____

COST OF MATERIAL: \$ _____

SIGNATURE: _____ DATE: _____

SUBMIT WITH EACH APPLICATION: One (1) site plan showing all structures (existing and proposed), setbacks to property lines, lot size, elevations, square footages, and driveway locations; and one (1) complete set of plans showing floor plans, dimensions and construction details. Include a digital copy if available.

Make check payable to: CITY OF BELPRE, P.O. BOX 160, 715 PARK DRIVE, BELPRE, OH 45714. Phone (740) 423-7592

===== OFFICE USE =====

Zoning permit#	Permit Fee\$:	Date Issued:
Flood Permit:	Use &Occupancy:	State Permit #:
Other Fee\$:	Start Date:	Variance:

PARCEL NUMBER: 0800 _____

PRESENT ZONING: _____ PRESENT USE: _____ FLOODPLAIN: _____ YES _____ NO

LOT SIZE: _____ FEET WIDTH _____ FEET DEPTH _____ SQUARE FEET

REQUIRED: _____ FEET WIDTH _____ FEET DEPTH _____ SQUARE FEET

SETBACK REQUIRED EXISTING PROPOSED LOT COVERAGE

FRONT: _____ FT _____ FT _____ FT _____ %

LEFT SIDE: _____ FT _____ FT _____ FT HEIGHT

RIGHT SIDE: _____ FT _____ FT _____ FT

REAR _____ FT _____ FT _____ FT

PER ORDINANCE IS PENALTY APPLICABLE: _____ YES _____ NO

IF SO, AMOUNT \$ _____

DO NOT FILL OUT THIS SIDE - FOR OFFICE USE ONLY

ACTION:

PERMIT APPROVED _____ DENIED _____ BY: _____

IF DENIED, GIVE REASON: _____

APPEALED:

TO BELPRE CITY PLANNING COMMISSION ON (DATE): _____

HEARING ON (DATE) _____

DECISION OF THE PLANNING COMMISSION: _____

BUILDING PERMIT RESUBMITTED ON (DATE) _____ APPROVED ON (DATE)

BY: _____

Safety Service Director: 740-423-7592

Code Enforcement: 740-423-7592

Utility location (PUPS): 811 AEP: 800-277-2177

Dominion Gas: 800-