

CITY OF CONNEAUT

HOUSING/ZONING OFFICE

Inspectors

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ZONING PERMIT APPLICATION

PERMIT # _____

Date of Application: _____ Zoning District _____ Parcel ID# _____ - _____ - _____ - _____

Job Location

Property Owner	Applicant Name (if different than owner)	
Street Address & Job Location (street number & name)	E-Mail Address	Phone Number

Contractor Information

Name of Owner or Company	Email Address	
Address (street number & name)	City	State & Zip Code
Phone Number with area code	Fax Number	Cell Phone No.

PROJECT DESCRIPTION: _____

Requirements

- ❖ Survey & 2 sets of Working Drawing(s) showing the dimensions of the structure (including elevations, site plan, etc.)
- ❖ Location of structure on the property with dimensions showing distances from lot lines and any other structures
- ❖ Material structure will be made of and how it will be anchored to foundation and/or building
- ❖ Site plans must be attached to application - Zoning Permit Fee \$40.00

Property Owner Signature

Cost of Project

Applicant Signature

Date

Office Use Only

Approved _____ Reason for Denial _____

Denied _____ Ref Ordinance No: _____

Zoning Administrator

Date Approved or Denied