



CITY OF ASHTABULA
APPLICATION FOR A CONDITIONAL USE PERMIT

Permit # _____

PROJECT LOCATION: _____ ZONING DISTRICT _____

Applicant / Owner: _____

Address: _____

City, State, Zip _____ Telephone (_____) _____

What type of development are you requesting, description of proposed Conditional Use:

Existing Use: _____

Name and Addresses of all abutting and adjacent property owners relative to the land upon which the proposed use is to be located:

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Signature of Applicant, Title

Date

You are required to submit a site plan. The following items must be included on the plan:

- | | | |
|--------------------------------|-----------------------------------|---|
| Lot dimensions | Arrow indicating north | Type of occupancy |
| Size of all existing buildings | Rear yard clearance in feet | Easements |
| Lot drainage | Provisions for off-street parking | Lot area in square feet |
| Set back distance in feet | Building no. and name of street | Both side yard clearances in feet |
| Height of existing buildings | Height of proposed buildings | Floor area in square feet of proposed buildings |
| Location of any signs | | |

For Office Use Only

Scheduled for Planning Commission: Yes No

Date of Meeting: _____

Public Hearing Date: _____

Notification in Paper: _____

Decision of Board: _____

Make Check or Money Order Payable To:

City of Ashtabula

Planning Commission Fee: \$ 100.00

Additional Fees: \$ _____

TOTAL FEES: \$ _____

Cash Check Check # _____