

# CITY OF CONNEAUT

## HOUSING/ZONING OFFICE

**Inspectors**

Melanie Shubitowski  
 Kelley Katon  
 Janet Brown

City Hall Building  
 294 Main Street  
 Conneaut, OH 44030

**Telephone**  
 (440) 593-7406

**Fax**  
 (440) 593-6908

**Email**  
[conneautz@conneautoh.org](mailto:conneautz@conneautoh.org)

### Commercial Structure Application

Date of Application: \_\_\_\_\_ Parcel# \_\_\_\_\_ Permit # \_\_\_\_\_

**Job Location**

Property Owner	Applicant Name (if different than owner)
Street Address & Job Location (street number & name)	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. ( ) ( )

Corporate Resolution documents attached ( ) YES ( ) NO

**Application for Planning Commission Review (must be submitted at least 5 days prior to Planning Commission Meeting, which is the 2<sup>nd</sup> Tuesday of each month)**

- |  |                |                                    |
|--|----------------|------------------------------------|
| ❖ Planned Unit Development Review Fee: | \$150.00       | Date Paid: _____ Cash/Check# _____ |
| ❖ Multi-Family Site Plan Review:       | \$150.00       | Date Paid: _____ Cash/Check# _____ |
| ❖ Commercial Site Plan Review:         | \$150.00       | Date Paid: _____ Cash/Check# _____ |
| ❖ Industrial Site Plan Review:         | \$250.00       | Date Paid: _____ Cash/Check# _____ |
| ❖ Subdivision:                         | \$25/per split | Date Paid: _____ Cash/Check# _____ |
| ❖ Zoning Amendment:                    | \$250.00       | Date Paid: _____ Cash/Check# _____ |

Estimated Engineering Review Fee Deposit Amount \$ \_\_\_\_\_ Date Paid: \_\_\_\_\_ Check#: \_\_\_\_\_

**Requirements:**

- 3 sets of Working Drawing(s) showing the dimensions of the structure
- 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
- 3 sets of Site Plans must be attached to application

\_\_\_\_\_  
 Property Owner Signature

\_\_\_\_\_  
 Cost of Project

\_\_\_\_\_  
 Applicant Signature

\_\_\_\_\_  
 Date

- If you have questions, please call the Zoning Administrator at 440-593-7406 or refer to the Conneaut Zoning Code

Department Use Only	
Approved _____	Reason for Denial _____
Denied _____	_____
_____	_____
_____ Zoning Administrator	_____ Date Approved or Denied

