



**APPLICATION FOR ZONING PERMIT**  
**NEW RESIDENTIAL HOMES OR COMMERCIAL PROJECTS**

(ONE APPLICATION MUST BE FILED FOR EACH LOT, BUILDING OR STRUCTURE)

Each application must have a site plan showing the location of the project, parking and landscaping or picture indicating accurate relevant dimension. All permits are issued to the applicant unless otherwise specified

PLANNING DEPARTMENT  
 100 S Market St. Troy, OH 45373  
 Phone (937)339-9481, Fax (937)339-9341  
[www.troyohio.gov](http://www.troyohio.gov)

1 LOCATION OF PROJECT	Project Address		Subdivision		Lot No(s)
	Type of structure				
2 REQD INFO	Names (Please <u>Print</u> )		Mailing Addresses – Street, City, Zip Code		Phone (Day time)
	APPLICANT				
	CONTRACTOR				
	PROPERTY OWNER				
3	Lot Size	4	Cost of construction & lot	5	# of stories or height of structure
6	New Construction or Addition	7	Sq ft of living Area or Addition	8	Sq Ft of Garage
9	Tap in Permit No.	10	Sidewalk Permit No.	11	Basement Yes No

12 SIGN YOUR FULL NAME			OFFICE USE ONLY					
By signing this application, I acknowledge that I am authorized by the owner to make this application. I agree to conform to all applicable laws of the City. . I agree to allow City of Troy employees to enter the property in order to complete necessary inspections.  Signature of applicant _____  Date: _____  Fax No. _____			TYPE OF WORK			FEE \$	TOTALS	
			RESIDENTIAL			\$50 + \$1.00 per 100 sf		
			NON RESIDENTIAL			\$100 + \$1.00 per 100 sf		
			TTL AMT DUE					
			TTL AMT PAID					
OFFICE USE ONLY								
ZONING DISTRICT	HISTORIC DISTRICT Yes No		FLOOD ZONING A B C					
Date:			Receipt No.					

APPROVAL CONTINGENT UPON THE FOLLOWING:

PERMIT ISSUED BY:

NOTES:

- REFER TO PERMIT NO:
- DATE: