



SIDEWALK, CURB CUT & OCCUPANCY PERMIT APPLICATION

Application Number: _____ Date: ____/____/____

FEES:

\$325.00 (Single Family)

Total Amount: \$ _____ Paid: Check #: _____ Cash: \$ _____

1. Applicant: _____ Phone: (____) _____ - _____
2. Property Address: _____ Johnstown, OH.
3. E-mail: _____
4. Location of sidewalk: On curb: _____ off curb: _____ how far from curb: _____
5. Will the proposed sidewalk require any special conditions? Yes: ____ No: ____ If yes, Explain: _____
6. Will the sidewalk connect with a pedestrian crosswalk? Yes: ____ No: ____ If yes, Explain: _____
7. Will you be required to add an ADA ramp?: Yes: ____ No: ____

IN ADDITION, THE FOLLOWING ITEMS MUST ACCOMPANY THIS APPLICATION:

- Plans showing location of the sidewalk
- Legal Description

The undersigned is applying for a Sidewalk Permit for the following use, said permit to be issued on the basis of the information contained within this application. The applicant hereby certifies that all information and attachments to this application are true and correct.

Applicant's Signature: _____ Date: ____/____/____

OFFICE USE ONLY:

Date Received: ____/____/____ By: _____

Permit was Approved Issued on Date: ____/____/____

Zoning Inspector: :x _____ Date: ____/____/____