



Village of New Concord Zoning Permit Application

VILLAGE OF NEW CONCORD

2 West Main St
PO Box 10
New Concord, OH 43762
740-826-7671

Application # _____

Intake Date: _____

Information is available on our website:
www.newconcord-oh.gov

The undersigned applies for a Zoning Permit for the following use, said permit to be issued based on the information contained within this application. The applicant certifies that all information and attachments to this application are true and correct. **Work cannot start until your zoning permit is approved.**

Applicants are responsible for checking if they are part of the Architectural Review District. Check the map here: <https://newconcord-oh.gov/wp-content/uploads/2020/12/New-Concord-Zoning-Map-JRF.pdf> to see if your address falls within the Architectural Review District. All properties within this area have required criteria and are subject to approval by the Design Review Board and must complete a certificate of appropriateness application before filing this form. **All properties within the Architectural Review District must also submit documents including building materials and color.**

Complete all relevant fields.

1. **Does your property fall under the Architectural Review overlay district?**
Circle one: Yes No I'm not sure
If yes, you must first have an approved certificate of appropriateness.
If you are unsure, check your address on our online zoning map listed above.

2. **Owner of Property:** _____

3. **Address of Property:** _____

If no address has been determined, please complete below:

Street Name: _____ Parcel No: _____

Phone Number: _____ Email: _____

4. **Contractor:** _____

Contractor Address: _____

Contractor Phone Number: _____

5. **Current Use:** Commercial Residential



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6. **Currently Zoned As:** _____ [New-Concord-Zoning-Map-JRF.pdf](#)
[\(newconcord-oh.gov\)](#)

7. **Are you intending to change the current land use? Please explain:**

8. **Proposed Project:**

sketch or drawing of the area must be included when the permit form is submitted.

9.

- | | |
|---|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Accessory Building |
| <input type="checkbox"/> Remodel (exterior) | <input type="checkbox"/> Porch |
| <input type="checkbox"/> Garage (attached) | <input type="checkbox"/> Roof/ siding |
| <input type="checkbox"/> Garage (detached) | |
| <input type="checkbox"/> Deck/Patio | |
| <input type="checkbox"/> Other _____ | |

Swimming Pool Circle One: Inground Above Ground
Size: _____ Depth: _____ Wall Size: _____

10. **Lot:** Width: _____ Depth: _____ Area: _____

11. **Square Feet:** Residence: _____ sq. ft. Garage: _____ sq. ft.
Accessory Building: _____ sq. ft.

12. **Building Heights:** Stories _____ Feet _____

13. **Yard Dimensions:** Front _____ Rear _____
Side 1 _____ Side 2 _____

14. **Accessory Building Dimensions:**

Height _____ Side Dimensions _____

Complete all relevant fields.



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15. **On a separate sheet attach a site plan showing size of lot, size of all buildings, measurements between buildings and property lines, and placement of all buildings, including proposed changes.**
16. **Utility locates must be done for any projects that involve digging. This can be accomplished by calling 811.**

Note: This permit shall be void if work is not started within one (1) year or completed within two (2) years. Work cannot start until your zoning permit is approved.

The undersigned hereby affirms that the proposed project in this application and as shown in the attached documents shall be completed as described and only as permitted by the Village Zoning Ordinances. By signing this application, the property owner and contractor hereby agree that his approval is for Village Zoning approval only and agree to obtain all other permits and/or approvals required by law and indemnify and hold harmless the Village and all officials for any injury, accident, claim or expense resulting from this project at any point.

Please submit this application to the Village of New Concord Zoning Officer located at 2 West Main Street New Concord, Ohio 43762

Signature of Applicant: _____ Date: _____



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FOR OFFICIAL USE ONLY:

Date received by Zoning Officer: _____ Application Number: _____

OUPS Ticket: _____

Checklist:

- Fee paid
- Drawing submitted
- Site plan (if applicable)
- Certificate of Appropriateness (if applicable)

Fee Paid Date: _____ Fee Amount: _____

Approved: _____ Denied: _____

If Approved, Permit Number: _____

Signed: _____ Date: _____
Zoning Officer or delegate