

PLANNING AND ZONING COMMISSION (P&Z) CERTIFICATE OF APPROPRIATENESS APPLICATION

ALL ITEMS ON THIS APPLICATION MUST BE COMPLETED.

Applicant:		
Email Address:		
		Fax No:
Property Owner:		
Address/City/State/Zip:		
Email Address:		
		Fax No:
Architect/Designer for Applicant: _		
Email Address:		
		Fax No:
Property Address:		
Lot Number/Subdivision:	Existing Use:	Proposed Use:
Proposed type of Environmental Chan	ge:	

Checklist:

Ш	Paper	copy o	f plot	plan a	as well	as any	other	drawings o	r written	material	that w	III neip the	e Adminis	tration	and
	_														

Commission understand the nature of the proposal.

□ 1 digital copy (CD, USB, Email) of the complete application packet.

 \square Attach the required fee - \$240.00

☐ Post a public notice sign at least (10) days prior to a public hearing or public meeting, pursuant to ordinance 11107.035 Public notice sign details found

here.

(See Over)

Application Fee: \$240.00

Per Fee Schedule

I agree to grant the City Staff, the Commission, Board or Council considering this application access to the property that is the subject of this application

for the purposes of reviewing this application and posting public notice for this application.

City of Powell · 47 Hall Street · Powell, Ohio 43065 · (614) 885-5380 · (614) 885-5339 fax· www.cityofpowell.us