

APPLICATION FOR "LIKE FOR LIKE"

Name of Owner/Applicant _____ Date of Application _____

Construction Site Address _____

Contractor _____ Phone # _____

Address of Contractor _____

Zoning District: Residential "R" _____ Mixed Use "M" _____ Conservation "C" _____
Institutional "I-1" _____ Institutional "I-2" _____ Institutional "I-3" _____

Building to be used as: Residence _____ Private Garage _____ Business _____
Institutional _____ Other _____

Description of planned work: _____

Type of construction: Wood _____ Brick _____ Stone _____ Concrete _____ Other _____

Cost of repairs or replacements: \$ _____

All electrical installations shall be in accordance with the National Electrical Code and no installation of electrical equipment shall be made except in conformity thereto.

*****Call Before You Dig*** OUPS 1-800-362-2764**

NOTE: State of Ohio Codes require submission and approval of plans to be used for Residential purposes (4 units or more), or any other use that is intended to have traffic, use, or occupancy by the Public.

AN INCOME TAX REGISTRATION AND SUB-CONTRACTOR DISCLOSURE FORM MUST BE FILLED OUT ALONG WITH THE "LIKE FOR LIKE" FORM.

The above information is true and correct to the best of my knowledge

Applicant's Signature

Telephone Number

Printed Name

Address

City, State, Zip Code

DO NOT WRITE BELOW THIS LINE

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ZONING & PLANNING REVIEW

Comments: _____

Approved for "Like for Like" _____

Disapproved for "Like for Like" _____

Date _____

Zoning Inspector